

COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

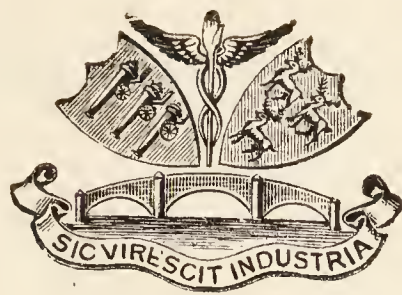
FOR THE YEAR

1943



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COUNTY BOROUGH OF ROTHERHAM

MEDICAL SERVICES COMMITTEE. PUBLIC HEALTH COMMITTEE.

(as at 31st December, 1943.)

THE WORSHIPFUL THE MAYOR (COUNCILLOR MRS. F. L. GREEN, J.P.)

Chairman :

ALDERMAN A. BUXTON, J.P.

Vice-Chairman :

COUNCILLOR D. J. S. MEADOWS.

Chairman :

ALDERMAN F. HARPER, J.P.

Vice-Chairman :

ALDERMAN F. C. WOFINDEN.

ALDERMAN G. C. BALL
„ S. HALL, O.B.E., J.P.
„ F. HARPER, J.P.
„ F. C. WOFINDEN
COUNCILLOR W. G. DENHAM
„ W. HEWITT
„ MRS. E. HUGHES
„ J. E. MICKLETHWAIT
„ MRS. M. E. MOORHOUSE,
J.P.
„ R. ROSE
„ A. R. SHAYLER

ALDERMAN G. C. BALL
COUNCILLOR G. A. BROWN
„ F. DAVIES
„ J. DICKINSON, J.P.
„ F. DUKE
„ MRS. E. HUGHES
„ J. E. MICKLETHWAIT
„ MRS. M. E. MOORHOUSE,
J.P.
„ W. J. OWEN
„ L. J. TARBIT
„ M. W. YOUNG

JOINT COMMITTEES.

SHEFFIELD, ROTHERHAM AND DISTRICT SMOKE ABATEMENT
COMMITTEE.

ALDERMAN F. HARPER, J.P.

COUNCILLOR G. A. BROWN.

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY
DEFICIENT.

ALDERMAN A. BUXTON, J.P.

ALDERMAN F. C. WOFINDEN.

HEALTH OFFICERS OF THE LOCAL AUTHORITY

(as at 31st December, 1943.)

WILLIAM BARR, M.D., D.Sc., D.P.H.	Medical Officer of Health and Chief School Medical Officer.
R. C. WOFINDEN, M.D., B.S., D.P.H., M.R.C.S., L.R.C.P.	Acting Deputy Medical Officer of Health ; Acting Senior School Medical Officer ; Medical Officer, Venereal Diseases.
T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Medical Superintendent, Municipal General Hospital ; Public Vaccinator, North-West Rotherham and Municipal General Hospital; Police Surgeon ; District Medical Officer.
A. C. MORRISON, M.D., D.P.H.	Tuberculosis Officer; Medical Superintendent, Oakwood Hall Sanatorium and Medical Superintendent, Isolation Hospital.
GEORGE E. WESTBY General Office	Lay Administrative Officer. Six Clerks.

CONSULTANT STAFF (part-time).

H. L. CROCKATT, M.B., Ch.B.	Orthopaedics.
GLYN A. DAVIES, F.R.C.S. Ed., M.R.C.O.G. M.B., Ch.B.,	Obstetrics.
A. W. FAWCETT, F.R.C.S., M.B., Ch.B.	Thoracic surgery.
W. J. LYTLE, F.R.C.S., M.B., B.Ch., B.A.O.	Surgery.
G. E. MOULD, M.R.C.S., L.R.C.P.	Mental diseases.
W. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.Eng.	Ophthalmology.
C. L. PATTISON, M.B., B.S., M.R.C.S., L.R.C.P.	Surgical tuberculosis.
H. M. PETTY, M.B., Ch.B., D.L.O., R.C.P.S. Eng.	Diseases of ear, nose, and throat.

PUBLIC ANALYST (part-time).

J. EVANS, F.I.C., F.C.S.	Public Analyst.
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SANITARY INSPECTORS' SECTION.

MR. J. E. FULLER, (1), (2), (4), (5), (6)	Senior Sanitary Inspector.
MR. W. PEARCE, (1), (2), (5), (6)	Assistant Senior Sanitary Inspector and Inspector of Food and Drugs.
MR. T. W. PEARCE, (1), (2), (5), (6)	Sanitary Inspector and Inspector of Meat.
MR. W. HORTON, (1), (2)	District Sanitary Inspector.
MR. G. C. HARRISON, (1)	District Sanitary Inspector.
MR. S. MASTIN, (1), (2)	District Sanitary Inspector.
MR. L. W. LODGE, (1), (2)	District Sanitary Inspector.
MR. N. FROGGATT, (1), (2)	Sanitary Inspector (Office).
MR. J. H. HOARE, (3)	Smoke Inspector (by arrangement with the Sheffield, Rotherham and District Smoke Abatement Committee).

TWO DISINFECTORS.

ONE RATCATCHER.

TWO CLERKS.

ONE INSPECTOR OF COMMON LODGING HOUSES (part-time).

QUALIFICATIONS :

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Meat and other foods).
- (3) Certificate, Royal Sanitary Institute (Smoke Inspector).
- (4) Certificate, San. Insp. Assoc. Exam. Bd. (Sanitary Inspector).
- (5) Certificate, Board of Education, Building Construction.
- (6) Certificate, City and Guilds Institute, Plumbing.

HEALTH VISITORS.

MISS J. BARRACLOUGH, (1), (5)	Superintendent Health Visitor and Non-Medical Supervisor of Midwives.
MISS E. G. CRESSWELL, (4), (5)	Assistant Senior Health Visitor.
MISS S. A. SIMM, (3), (4), (5)	Health Visitor.
MRS. M. AIRTON, (2), (5)	Health Visitor.
MISS A. W. GAFFNEY, (3), (4), (5)	Health Visitor.
MISS J. OLDERSHAW, (3), (4), (5)	Health Visitor.
MISS K. POWER, (4), (5)	Student Health Visitor.

(Three vacancies including one on war service).

M.C.W. SECTION

Four Clerks.

QUALIFICATIONS :

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Health Visitor).
- (3) Health Visitors Exam. under Ministry of Health Regulations.
- (4) State Registered Nurse.
- (5) State Certified Midwife.

SCHOOL MEDICAL SERVICE.

R. C. WOFINDEN, M.D., B.S., D.P.H., M.R.C.S., L.R.C.P.	Acting Senior School Medical Officer.
MARY D. BOYD, M.B., Ch.B.	Assistant Medical Officer (Schools and Child Welfare).
(Vacancy)	Assistant Medical Officer (Schools and Child Welfare, temporary).
R. HEALD, L.D.S.	School Dental Surgeon.
MISS D. M. BATEMAN, B.Ch.D., L.D.S.	Assistant School Dental Surgeon.
MISS A. C. HAMPTON, C.S.M.M.G. & M.G. (1)	Orthopaedic Nurse and Masseuse.
MISS C. H. CROFTON, (1), (2)	School Nurse.
MISS G. K. CAVE, (1), (2)	School Nurse.
MRS. N. LLOYD, (1)	School Nurse.
MRS. M. A. FROST, (1), (3)	School Nurse.
MISS E. M. BORMAN, (1)	School Nurse.
MRS. E. ROBERTS, (1)	School Nurse.
MISS N. EASTON, (1), (2)	School Nurse (Nurseries and Child Welfare).
MISS W. M. COOPER	Senior Clerk.

Four Clerks.

Three Dental Attendants.

QUALIFICATIONS :

- (1) State Registered Nurse.
- (2) State Certified Midwife.
- (3) State Registered Fever Nurse.

MUNICIPAL GENERAL HOSPITAL.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.	Medical Superintendent.
D. BALLANTINE, M.B., Ch.B., F.R.C.S., L.M.	Deputy Medical Superintendent and Obstetric Officer.
P. R. WOODCOCK, M.B., Ch.B., B.A.O.	Assistant Resident Medical Officer.
G. R. S. JACKSON, L.M.S.S.A.	Assistant Resident Medical Officer.
M. SILVERMAN, M.B., B.Ch.	Assistant Resident Medical Officer.
A. BAGON, L.M.S.S.A.	District Medical Officer.
H. M. MILLS, M.B., Ch.B.	District Medical Officer (part-time).
MISS C. E. DAVIS	Matron.
MISS N. HILTON	Assistant Matron and Sister Tutor.
MISS A. M. SUMMERSGILL	Sister Tutor (Midwifery).
MISS M. BETTERTON	Radiographer.
MR. E. E. DAVIES	Masseur.
MISS R. K. COOPER	Senior Dispenser.
MR. G. M. SMITH	Clerk and Steward (temporary).
MISS M. M. USHER	Senior Clerk.
One Assistant Dispenser.	
Five Clerks.	

OAKWOOD HALL SANATORIUM.

A. C. MORRISON, M.D., D.P.H.	Medical Superintendent.
D. M. F. ENGLISH, M.B., Ch.B., B.A.O.	Assistant Resident Medical Officer.
MISS A. SMCLETON	Matron.
MRS. E. SHARPLES	Teacher (Uncertificated).

ISOLATION HOSPITAL.

A. C. MORRISON, M.D., D.P.H.	Medical Superintendent.
MISS M. CLEWS	Acting Matron.

TUBERCULOSIS DISPENSARY.

A. C. MORRISON, M.D., D.P.H.	Tuberculosis Officer.
Two Clerks.	

V.D. CENTRE.

R. C. WOFINDEN, M.D., B.S., D.P.H., M.R.C.S., L.R.C.P.	V.D. Medical Officer.
MR. P. DOANE	Venereal Diseases Orderly.
MRS. P. MILLBURN, S.R.N., S.C.M.	Venereal Diseases Nurse.

CLINICAL LABORATORY.

MR. C. W. OLIVER, B.Sc., A.M.I.L.T.	Laboratory Technician.
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MIDWIFERY SERVICE.

D. BALLANTINE, M.B., Ch.B., F.R.C.S., L.M.	Obstetric Officer.
MISS J. BARRACLOUGH	Non-Medical Supervisor of Midwives
MRS. M. J. WALSH	Superintendent Midwife.
MRS. S. E. GOSLING	Deputy Superintendent Midwife.

MRS. V. DAVIES
 MRS. J. GRESSER
 MISS E. D. JEYES
 MRS. I. MCGANN
 MRS. H. V. MOORCROFT
 MISS A. SIMM
 MRS. E. PUGH
 MISS E. DAWSON
 MISS K. RAY
 MISS G. G. TAYLOR

District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 District Midwife.
 Relief Midwife (temporary).

WAR-TIME NURSERIES.

MISS Q. E. POWELL
 MISS M. E. CLARK
 MISS E. D. CLOUGH
 MISS M. E. SELMAN
 MRS. P. GRIFFITH
 MRS. J. BARKER

Superintendent Matron.
 Deputy Matron, Moorgate Nursery.
 Deputy Matron, Arnold Road Nursery.
 Deputy Matron, Erskine Road Nursery.
 Deputy Matron, Thames Street Nursery.
 Certificated Teacher.

PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.
 H. R. ELLIOTT, M.R.C.S., L.R.C.P.
 D. P. K. JOCKEL, M.D.
 MR. F. S. BUTCHER

Public Vaccinator, North-West Rotherham and
 Municipal General Hospital.
 Public Vaccinator, South-East Rotherham.
 Public Vaccinator, Rawmarsh (part of).
 Vaccination Officer.

The following members of the staff and workpeople were on War Service at 31st December, 1943 :

N. M. MACDONALD, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health and Senior
 School Medical Officer.

J. URQUHART, M.B., Ch.B., D.P.H.

Assistant Medical Officer (Schools and Child
 Welfare).

P. SOMERVILLE, M.B., Ch.B.

Assistant Resident Medical Officer, Oakwood
 Hall Sanatorium.

F. S. DODD, L.D.S.

Assistant School Dental Surgeon.

MISS C. BARRACLOUGH

Matron, Isolation Hospital.

MISS T. ANTHONY

Health Visitor.

MR. G. H. BIGGIN

Clerk, General Office.

MR. R. WILD

Clerk, General Office.

MR. H. BEELEY

Clerk, General Office.

MISS M. LONGSTAFF

Clerk, M.C.W. Section.

MISS J. BROADHEAD

Clerk, M.C.W. Section.

MR. H. D. ELLIS

Clerk, Sanitary Inspectors' Section.

MR. E. FULLER

Clerk, Sanitary Inspectors' Section.

MR. J. D. JOHNSTON

Clerk, School Medical Section.

MR. S. STOPPARD

Clerk and Steward, Municipal General Hospital.

MR. E. HARDY

Clerk, Municipal General Hospital.

MR. L. MANN

Assistant Porter, Isolation Hospital.

MR. C. CASSWELL

Assistant Porter, Isolation Hospital.

MR. F. BAGSHAW

Mental Attendant, Municipal General Hospital.

MR. H. JESSOP

Mental Attendant, Municipal General Hospital.

MR. J. ATKIN

Porter, Municipal General Hospital.

Department of Health,
Municipal Offices,
Rotherham.

I herewith submit my report on the state of the public health of the County Borough of Rotherham for the year 1943.

Despite war conditions and reduced staff consequent thereon, not only was the more important work of the department carried on at a generally high level, certain normal activities being of necessity curtailed, but several new departures were embarked upon to improve the service.

A pleasing feature was the closer linkage between the Rotherham Hospital and the Municipal General Hospital with the establishment of a Joint Committee. It was decided that in the mutual working of the two hospitals cases from the Rotherham Hospital which could be classified as chronic should, with proper safeguards, be transferred to the Municipal General Hospital ; that cancer cases similarly should be referred there to come under the municipal radium and cancer scheme ; and that the clinical pathological service of the Council should be available for and used by both hospitals.

The establishment of this service of clinical pathology was another definite step in departmental development although at the end of the year the laboratory was only in a very early stage.

Once more I have to place on record the unfailing loyalty of the staff, and particularly of the trusted senior technical and clerical officers to whose enterprise I am indebted for the satisfactory work of the department and for the compilation of this report.

WILLIAM BARR,
Medical Officer of Health.

SECTION I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

GENERAL STATISTICS.

Area (in acres)	..	..	..	..	..	..	..	..	..	9,255
Population (census) 1931, prior to 1st April, 1936	..	..	..	..	..	..	..	..	..	69,691
as constituted 1st April, 1936	..	..	..	..	..	..	..	..	..	75,223
Population (estimated civilian) 1943	..	..	..	..	..	..	..	..	..	74,250
Number of inhabited houses (31/12/1943)	..	..	..	..	..	..	..	..	..	21,540
Rateable value (1/4/1944)	..	..	..	..	..	..	..	..	..	£465,596
Sum represented by a penny rate (1/4/1944)	..	..	..	..	..	..	..	..	..	£1,840

VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

Live births :	Total	Male	Female		
Legitimate ..	1324	720	604	Birth rate per 1,000 of the estimated	
Illegitimate ..	73	37	36	resident population ..	18·81
Stillbirths ..	41	22	19	Rate per 1,000 (live and still) births	28·51
Deaths ..	900	493	407	Crude death rate per 1,000 of the	
				estimated resident population	12·12
				Adjusted death rate per 1,000 of the	
				estimated resident population	
				(comparability figure) ..	13·94
Deaths from puerperal causes :				Deaths	Rate per 1,000 total (live
					and still) births
Puerperal sepsis ..	..	..	..	—	—
Other puerperal causes	..	..	..	5	3·48
				—	—
Total..	..	..	..	5	3·48
				—	—
Death rate of infants under one year of age :					
All infants per 1,000 live births	..	..	..	..	65
Legitimate infants per 1,000 legitimate live births..	..	..	..	..	64
Illegitimate infants per 1,000 illegitimate live births	..	..	..	..	82
Deaths from measles (all ages)	..	..	..	..	3
Deaths from whooping cough (all ages)	..	..	..	..	4
Deaths from diarrhoea (under 2 years of age)	..	..	..	..	15

In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare and mental deficiency.

In the following table the cause of death at different periods of life, as supplied by the Registrar General, are given for the year 1943. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths *registered* in the calendar year, which totalled 900.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which *occurred* during the year, totalling 899 and have been compiled locally.

CAUSE OF DEATH	MALES							FEMALES							Total
	0-	1-	5-	15-	45-	65-	Total	0-	1-	5-	15-	45-	65-	Total	
1. Typhoid and para-typhoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Cerebro-spinal fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3. Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Whooping cough	-	-	-	-	-	-	-	-	4	-	-	-	-	4	4
5. Diphtheria	-	2	2	-	-	-	4	1	-	2	1	-	-	4	8
6. Tuberculosis of respiratory system	-	-	-	9	17	2	28	-	-	-	8	2	-	10	38
7. Other tuberculous diseases ..	-	1	-	-	-	-	1	-	-	1	1	-	-	2	3
8. Syphilis	-	-	-	-	2	-	2	-	-	-	-	1	-	1	3
9. Influenza	1	-	-	1	3	5	10	1	1	-	1	4	4	11	21
10. Measles	1	-	-	-	-	-	1	1	-	1	-	-	-	2	3
11. Acute polio-myelitis and polio-encephalitis	-	-	-	1	-	-	1	-	-	-	1	-	-	1	2
12. Acute infectious encephalitis ..	-	-	-	1	-	-	1	-	-	-	1	-	-	1	2
13. Cancer of buccal cavity and oesophagus (M) Uterus (F) ..	-	-	-	1	-	7	8	-	-	-	3	9	4	16	24
14. Cancer of stomach and duodenum	-	-	-	-	3	4	7	-	-	-	1	1	2	4	11
15. Cancer of breast	-	-	-	-	-	-	-	-	-	-	1	3	6	10	10
16. Cancer of all other sites ..	-	-	-	6	18	23	47	-	-	1	3	5	14	23	70
17. Diabetes	-	-	-	-	1	5	6	-	-	-	2	2	2	6	12
18. Intra-cranial vascular lesions ..	-	-	-	-	13	23	36	-	-	-	1	13	33	47	83
19. Heart disease	-	-	-	2	33	49	84	-	-	3	10	20	50	83	167
20. Other circulatory diseases ..	-	-	-	-	2	7	9	-	-	-	-	-	5	5	14
21. Bronchitis	3	-	-	3	20	24	50	2	-	-	1	6	17	26	76
22. Pneumonia	14	1	2	2	5	5	29	8	4	-	1	10	6	29	58
23. Other respiratory diseases ..	2	-	-	1	4	-	7	-	-	-	-	1	1	2	9
24. Ulcer of stomach or duodenum ..	-	-	-	1	5	2	8	-	-	-	-	-	1	1	9
25. Diarrhoea (under 2 years of age)	10	-	-	-	-	-	10	5	-	-	-	-	-	5	15
26. Appendicitis	-	-	1	-	1	-	2	-	-	1	-	1	-	2	4
27. Other digestive diseases ..	1	-	-	-	1	4	6	1	-	-	3	1	7	12	18
28. Nephritis	-	-	-	2	2	4	8	-	-	1	5	4	2	12	20
29. Puerperal sepsis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
30. Other maternal causes	-	-	-	-	-	-	-	-	-	-	5	-	-	5	5
31. Premature birth	8	-	-	-	-	-	8	4	-	-	-	-	-	4	12
32. Congenital malformation, birth injury, etc.	16	1	-	-	-	-	17	6	-	-	-	-	-	6	23
33. Suicide	-	-	-	-	1	2	3	-	-	-	-	2	1	3	6
34. Road traffic accidents	-	1	2	2	2	5	12	-	-	1	3	1	-	5	17
35. Other violent causes	-	1	2	5	7	2	17	1	-	-	1	1	7	10	27
36. All other causes	2	1	-	2	12	54	71	3	1	-	8	9	34	55	126
Total—all causes	58	8	9	39	152	227	493	33	10	11	61	96	196	407	900

In the following table the vital statistics of the Borough in relation to the months of the year are given :—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total 1943
Rainfall—No. of wet days	19	11	2	13	11	11	3	10	11	10	11	9	121
Inches of rain	3·16	0·77	0·49	1·45	2·44	1·10	0·43	1·35	3·65	1·42	1·72	0·83	18·81
Maximum daily fall—day ..	22nd	6th	25th	5th	8th	2nd	10th	27th	13th	17th	1st	21st	—
Maximum daily fall—inches	0·49	0·19	0·49	0·46	0·49	0·23	0·22	0·31	1·23	0·38	0·54	0·20	—
Births—Total	127	102	131	97	126	113	118	119	126	115	100	118	1,392
Birth rate	20·52	16·48	21·17	15·68	20·36	18·27	19·07	19·23	20·36	18·59	16·16	19·07	18·75
Deaths—Gross	101	102	113	86	82	80	70	84	68	95	105	159	1,145
Outward transfers	29	19	27	22	23	22	22	24	23	26	24	39	300
Inward transfers	5	5	7	4	2	2	5	6	4	4	5	5	54
Nett	77	88	93	68	61	60	53	66	49	73	86	125	899
Death rate (crude)	12·45	14·22	15·03	10·99	9·86	9·70	8·57	10·67	7·92	11·80	13·90	20·20	12·11
Nett deaths under 1 year of age ..	13	15	9	2	8	5	5	7	5	10	4	10	93
Infantile mortality rate per 1,000 births	102	147	69	21	63	44	42	59	40	87	40	85	67
CASES OF INFECTIOUS DISEASE REPORTED	Acute anterior poliomyelitis ..	—	—	—	—	—	2	—	1	—	1	—	4
	Acute polio-encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
	Cerebro-spinal meningitis	1	1	—	—	—	1	—	—	2	—	—	5
	Diphtheria	4	6	6	5	5	2	4	6	6	12	4	66
	Dysentery	—	—	—	—	3	—	—	—	—	—	—	3
	Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas	2	6	4	5	6	4	2	3	3	6	2	47
	Malaria	—	—	—	—	—	—	—	—	—	—	—	—
	Measles	291	223	163	109	39	19	14	8	1	1	2	871
	Ophthalmia neonatorum	—	2	—	—	—	—	2	2	—	—	—	6
	Pemphigus neonatorum	—	—	—	—	—	—	—	—	—	—	—	—
	Pneumonia	9	23	29	22	3	6	6	—	4	7	10	140
	Puerperal pyrexia	1	—	—	1	2	1	—	—	1	—	1	7
	Relapsing fever	—	—	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	22	18	14	22	15	21	24	16	24	28	37	272
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers ..	—	—	—	—	—	—	—	—	—	—	—	—
	Typhus fever	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	5	8	15	18	25	22	26	16	15	14	26	211
	Pulmonary tuberculosis— Males	4	2	3	2	5	2	1	4	2	2	1	35
	Females	—	2	3	1	2	3	—	1	—	—	—	14
	Other forms of tub'culosis— Males	—	—	1	1	—	—	—	—	—	—	—	2
	Females	—	—	—	—	1	—	—	3	—	—	2	6
DEATHS	Diphtheria	1	2	2	1	1	—	1	—	—	—	—	8
	Erysipelas	—	—	1	—	—	—	—	—	—	—	—	1
	Measles	—	1	2	—	—	—	—	—	—	—	—	3
	Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	—	—	—	1	—	1	—	—	—	1	1	4
	Tuberculosis—respiratory ..	5	2	2	3	3	3	5	2	4	3	3	38
	„ other forms	—	—	—	—	1	1	—	1	—	—	—	3
	Influenza	—	1	1	2	—	—	—	—	1	1	15	21
	Diarrhoea & enteritis (under 2 yrs.)	2	1	2	1	1	2	1	3	1	1	1	17
	Bronchitis	3	7	11	12	3	2	3	5	2	4	7	77
	Pneumonia	3	13	7	3	2	4	1	7	4	4	11	60
	Malignant disease	13	9	8	9	10	9	10	8	10	12	11	113
	Diseases of the heart	14	15	19	8	18	13	10	16	10	9	12	162
	Nephritis and Bright's disease ..	1	2	1	3	1	2	1	2	—	1	2	17

In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

	Clifton Ward	East Ward	Greas- bro' Ward	Kim- ber- worth Ward	Mas- bro' Ward	North Ward	St. Ann's Ward	South Ward	Thorn- hill Ward	West Ward	Total 1943
Estimated civilian population ..	10470	12840	3220	9800	4990	5960	6880	8840	4860	6390	74,250
Number of houses, 31/12/43 ..	3029	3752	944	2875	1464	1750	2019	2593	1425	1653	21,504
Acreage	785	952	1403	2913	411	300	122	711	212	1446	9,255
Density of houses per acre ..	3·86	3·94	0·67	0·99	3·56	5·83	16·55	3·65	6·72	1·14	2·32
Density of population per acre ..	13·33	13·49	2·30	3·36	12·14	19·87	56·39	12·44	22·93	4·42	8·02
Births—Total	156	268	70	196	96	105	129	129	112	131	1,392
Birth rate	14·90	20·86	21·74	20·00	19·24	17·62	18·75	14·59	23·04	20·50	18·75
Deaths—Gross	189	132	34	106	73	62	97	87	67	298	1,145
Outward transfers ..	66	4	1	13	2	1	—	2	—	211	300
Inward transfers ..	4	13	—	10	4	1	9	5	1	7	54
Nett	127	141	33	103	75	62	106	90	68	94	899
Death rate (crude) ..	12·13	10·98	10·24	10·51	15·03	10·40	15·40	10·18	13·99	9·72	12·11
Nett deaths under 1 year of age ..	18	15	3	11	7	3	10	6	9	11	93
Infantile mortality rate per 1,000 births	115	56	43	56	73	29	78	47	80	84	67
CASES OF INFECTIOUS DISEASE REPORTED	Acute anterior poliomyelitis ..	—	—	—	—	—	1	3	—	—	4
	Acute polio-encephalitis ..	—	—	—	—	—	—	—	—	—	—
	Cerebro-spinal meningitis ..	—	1	2	1	—	—	—	1	—	5
	Diphtheria	10	11	2	9	7	10	7	3	7	66
	Dysentery	—	—	—	—	—	—	—	—	3	3
	Encephalitis lethargica ..	—	—	—	—	—	—	—	—	—	—
	Erysipelas	6	6	2	10	5	3	3	3	6	47
	Malaria	—	—	—	—	—	—	—	—	—	—
	Measles	129	96	40	182	68	90	65	69	74	871
	Ophthalmia neonatorum ..	—	—	—	1	2	—	—	3	—	6
	Pemphigus neonatorum ..	—	—	—	—	—	—	—	—	—	—
	Pneumonia	11	16	5	34	12	16	4	10	19	140
	Puerperal pyrexia	2	—	—	1	1	—	—	—	2	7
	Relapsing fever	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	41	77	13	36	15	12	22	27	9	272
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers	—	—	—	—	—	—	—	—	—	—
	Typhus fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	23	39	8	30	15	26	13	25	11	211
	Pulmonary tuberculosis—										
	Males	4	8	2	4	5	1	3	1	3	35
	Females	3	3	1	—	1	1	—	2	1	14
	Other forms of tuberculosis—										
	Males	1	—	—	—	1	—	—	—	—	2
	Females	—	1	—	—	1	1	—	1	2	6
DEATHS	Diphtheria	1	2	2	1	1	—	—	—	1	8
	Erysipelas	—	—	—	—	—	—	1	—	—	1
	Measles	—	—	—	2	1	—	—	—	—	3
	Scarlet fever	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	1	—	—	1	—	2	—	—	—	4
	Tuberculosis—respiratory ..	6	10	1	2	5	4	2	3	4	38
	„ other forms	—	—	—	—	—	1	—	1	1	3
	Influenza	2	3	1	4	1	4	3	2	—	21
	Diarrhoea & enteritis (under 2 yrs.)	2	2	—	4	—	4	—	3	2	17
	Bronchitis	7	14	2	8	10	4	12	8	8	77
	Pneumonia	14	9	1	3	6	4	6	3	11	60
	Malignant disease	14	12	2	13	10	8	18	20	8	113
	Diseases of the heart	20	18	8	26	14	14	11	19	21	162
	Nephritis and Bright's disease ..	5	3	2	1	1	—	2	1	1	17

The following table shows the birth-rate, death-rate, and analysis of mortality, during the years 1939-1943, compared with England and Wales as a whole and various other areas.

(The mortality rates for England and Wales refer to the whole population but for London and the towns to civilians only.)

	Year	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 BIRTHS		RATE PER 1,000 LIVE AND STILL-BIRTHS		
		Live births	Still births	All causes	Enteric fever	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria	Influenza	Diarrhoea and enteritis under two years	Total deaths under one year	MATERNAL MORTALITY RATE		
														Puerperal sepsis	Other maternal causes	Total
England and Wales	1939	15.0	0.59	12.1	0.00	—	0.01	0.01	0.03	0.05	0.21	4.6	50	0.77	2.16	2.93
	1940	14.6	0.55	14.3	0.00	—	0.02	0.00	0.02	0.06	0.32	4.6	55	0.52	1.64	2.16
	1941	14.2	0.51	12.9	0.00	—	0.03	0.00	0.06	0.07	0.19	5.1	59	0.48	1.75	2.23
	1942	15.8	0.54	11.6	0.00	—	0.01	0.00	0.02	0.05	0.09	5.2	49	0.42	1.59	2.01
	1943	16.5	0.51	12.1	0.00	—	0.02	0.00	0.03	0.03	0.37	5.3	49	0.73	1.56	2.29
126 County Boroughs and Great Towns, including London	1939	14.8	0.59	12.0	0.00	—	0.01	0.00	0.03	0.05	0.19	6.3	53	Not available		
	1940	16.0	0.64	15.8	0.00	—	0.02	0.00	0.02	0.07	0.29	5.9	61			
	1941	14.7	0.58	14.9	0.00	—	0.03	0.00	0.07	0.08	0.17	7.5	71			
	1942	17.3	0.66	13.3	0.00	—	0.02	0.00	0.03	0.06	0.09	7.5	59			
	1943	18.6	0.63	14.2	0.00	—	0.02	0.00	0.03	0.04	0.36	7.9	58			
148 Smaller Towns (estim- ated resident populations 25,000 to 50,000 at Census 1931)	1939	15.6	0.57	11.2	0.00	—	0.01	0.00	0.02	0.04	0.20	3.0	40	Not available		
	1940	15.7	0.55	12.8	0.00	—	0.02	0.00	0.02	0.05	0.30	4.4	54			
	1941	16.4	0.60	13.0	0.00	—	0.03	0.01	0.06	0.06	0.20	4.6	56			
	1942	18.4	0.62	12.1	0.00	—	0.01	0.00	0.02	0.04	0.10	4.8	46			
	1943	19.4	0.61	12.7	0.00	—	0.02	0.00	0.03	0.04	0.37	4.4	45			
London (Administrative county)	1939	12.3	0.44	11.9	0.00	—	0.00	0.00	0.03	0.02	0.18	8.2	48	Not available		
	1940	13.7	0.44	17.8	0.00	—	0.01	0.00	0.00	0.01	0.18	5.8	50			
	1941	8.9	0.33	16.3	0.01	—	0.02	0.00	0.04	0.03	0.15	6.8	68			
	1942	14.0	0.48	13.9	0.00	—	0.01	0.00	0.04	0.02	0.07	8.6	60			
	1943	15.8	0.45	15.0	0.00	—	0.02	0.00	0.03	0.02	0.27	10.4	58			
Rotherham (Adjusted death rates)	1939	16.9	0.71	12.5	—	—	—	—	0.03	0.07	0.16	3.8	53	0.77	2.30	3.07
	1940	18.0	0.69	14.2	0.01	—	0.03	—	0.06	0.21	0.30	2.2	62	—	2.21	2.21
	1941	17.9	0.67	13.1	—	—	0.01	—	0.06	0.21	0.07	3.7	66	0.74	2.23	2.97
	1942	18.1	0.73	11.8	0.01	—	—	—	0.09	0.23	0.03	4.6	50	—	0.77	0.77
	1943	18.8	0.55	13.9	—	—	0.04	—	0.06	0.12	0.32	10.7	65	—	3.48	3.48

NOTE : A dash (—) signifies that there were no deaths.

SECTION II

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

PROFESSIONAL NURSING IN THE HOME.

The arrangements outlined in the last report regarding the assistance given to nursing associations by the Corporation continued throughout the year. On the adoption of the Rushcliffe Scale of Salaries by these associations, the Corporation increased their grants and also made an advance to them on behalf of the government exchequer grant as instructed by the Ministry of Health.

MIDWIVES.

In Section VIII of this report will be found the report on the midwives practising in the Borough during the period under review.

NATIONAL HEALTH INSURANCE.

No change has occurred during the year in the work of the Local Authority which is administered in co-operation with the National Health Insurance service as commented upon in the last report.

LABORATORY FACILITIES.

In the early part of the year, the Ministry of Health reviewed the pathological service of the County Borough, not only with regard to the Emergency Hospital arrangements but generally for all the hospitals, clinics, medical practitioners, and the Department of Health. The suggestions of the Ministry of Health which were considered and adopted by the Medical Services Committee were as follow :—

1. The laboratory to be situated in Block D of the Municipal General Hospital. Adaptations and approved expenditure to rank for grant.
2. The Ministry to supply initial equipment necessary on a standard issue.
3. The Ministry to secure for the Corporation a suitable pathologist and a qualified technician.
4. The organisation and administration to be a matter of local concern between the Municipal Health Authority and the Rotherham Hospital, the Ministry paying for any work done on its behalf.
5. The pathologist to be equally available for both the Municipal Authority and the Rotherham Hospital.

6. Close co-operation to be maintained with the Pathological Department of the University of Sheffield to ensure the highest degree of efficiency.
7. The arrangements to be mutually settled between the Municipal Authority and the Rotherham Hospital.

The plan of works to be carried out in connection with the laboratory was duly submitted and the cost of the initial alterations approved to rank for grant. Certain of the equipment was received from the American Red Cross Society through the War Organisation of the British Red Cross Society and Order of St. John of Jerusalem on loan to the laboratory. The Ministry also assisted the Corporation in obtaining trained staff and on the 11th October, Mr. C. W. Oliver commenced his duties as laboratory technician. Later on in the year, Dr. E. H. Gillespie was appointed as clinical pathologist and took up his duties early in 1944.

During the year, a request was received from the Rotherham Rural District Council asking if the Corporation would be prepared, as a wartime measure, to undertake the bacteriological examination of swabs for diphtheria. This request was approved.

MUNICIPAL GENERAL HOSPITAL.

The district served by the hospital remained the same, namely the County Borough of Rotherham and the Rother Valley Public Assistance area, each with roughly a similar population.

BEDS.

The beds provided for sick, maternity, and mental cases were 385 at the Municipal General Hospital and 21 at Sandygate House, Wath-upon-Deane, a total of 406 beds. This was a reduction on the 1942 beds provided and was due to the return of 20 beds from the Municipal General Hospital to the Alma Road Institution as from 18th March, 1943.

STAFF.

The medical staff consists of the medical superintendent, the deputy medical superintendent, and four resident medical officers, together with the following visiting consultants :—Surgeon ; ophthalmic surgeon ; thoracic surgeon ; obstetrician ; ear, nose and throat surgeon ; medical officer for cancer and radium, and two medical officers for nervous diseases.

A visiting dentist is also employed by the hospital, while a radiographer and a masseur are on the permanent staff.

The nursing staff under the matron has been kept up to full strength and efficiency. This position is greatly helped by the hospital being a training school, not only for general nursing but for midwifery (part 2) as well.

IN-PATIENTS.

Details of in-patients (including Service patients) treated are shown in the following table :—

	Municipal General Hospital, Rotherham	Sandygate House Annexe, Wath	Total
In-patients (including births)	3,263 ..	1,055 ..	4,318
Deaths	412 ..	12 ..	424
Discharges	2,829 ..	1,052 ..	3,881

OUT-PATIENTS.

The out-patient department for continuation of treatment, emergency treatment, consultations, etc., comprises the following sections :—General out-patients and patients under the Social Welfare (late Public Assistance) Committee ; ante-natal ; nervous diseases ; physiotherapy ; dental ; radium and cancer ; gynaecological and post-natal ; ear, nose and throat ; and x-ray.

23,085 attendances were made during the year.

MIDWIFERY.

The following table provides a general picture of the work of this section of the hospital, including the Sandygate House annexe :—

	Municipal General Hospital, Rotherham	Sandygate House Annexe, Wath	Total
Women confined	151 ..	503 ..	654
Maternal deaths	7 ..	1 ..	8
Live births	134 ..	496 ..	630
Still births	18 ..	10 ..	28
Deaths of newly-born (under 4 weeks)	19 ..	11 ..	30

Detailed statistics of ante-natal and midwifery work performed will be found in Section VIII of this report.

CANCER.

The number of patients treated during the year was 96.

In addition to operative measures, radium and deep x-ray therapy are provided under the direction of a medical consultant from the Sheffield Radium Centre.

TUBERCULOSIS.

The total number of cases admitted (County Borough and West Riding areas) were :—

Pulmonary	..	..	..	..	..	..	..	..	16
Non-pulmonary	..	..	..	..	..	..	..	..	5

During the year, part of Block D was converted into premises for the use of the clinical laboratory.

In March, the Council decided, in view of the infectivity of scabies and impetigo, to provide hospital treatment free of charge at the Municipal General Hospital.

As from 4th August, 1943, the Council adopted the recommendations which had been approved by the Association of Municipal Corporations and the British Hospitals Contributory Schemes Association for the revision of the agreements with local hospital contributory schemes. It was agreed that the sum of £3 0s. 0d. would be paid by these schemes for each case in which a hospital letter of introduction was submitted and would cover a period of up to ten weeks treatment. In the event of treatment beyond ten weeks, and where the patient was not suffering from a chronic condition, the contributory scheme could submit a further voucher to cover the patient's maintenance. In cases where vouchers were not accepted, the patient to be assessed in accordance with the Council's scale. Letters of introduction are not accepted in respect of tuberculosis, infectious disease, maternity or mental cases.

Towards the end of the year, the Council approved the appointment of a Sister Tutor (Midwifery) and application was made to the Central Midwives Board for their approval of the selected candidate. This had not been received by the end of the year, but was approved early in 1944.

MATERNITY AND NURSING HOMES.

One new maternity home of six beds was registered during the year. The registration of the existing maternity and nursing home was increased by one bed over the initial registration.

At the end of the year, three homes were registered under the provisions of the Public Health Act, 1936—two as maternity homes only and the other as a maternity and nursing home.

The homes have been inspected by the Medical Officer of Health, the Superintendent Health Visitor, and the Obstetric Officer.

MATERNAL MORTALITY.

No change has been made in the arrangements made and reported upon in previous years.

All cases of puerperal pyrexia are enquired into by the Obstetric Officer, and particulars of these enquires will be found in Section VIII of this report.

In the above section also will be found the report upon the midwives practising in the Borough, together with the comments upon the administrative action taken.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

There have been no changes in the arrangements for the above as enumerated in the report for 1931.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of the mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for Mental Defectives, who control the St. Catherine's Certified Institution, Loversall, near Doncaster, and which had at the end of 1943 a total available accommodation of 480 beds.

The occupation of the beds allocated to Rotherham cases is given in detail in Section IX of this report. In this section also will be found full detailed particulars of the Rotherham cases in institutions, other than that provided by the joint board.

AMBULANCE FACILITIES.

One motor ambulance is used for the removal of cases of infectious diseases and is maintained at the Isolation Hospital.

Accidents, non-infectious cases and maternity cases were dealt with by the Civil Defence Ambulance Service.

CLINIC AND TREATMENT CENTRES.

The list of out-patient clinics under the control of the Corporation as listed in the last report remained unchanged throughout the year.

CANCER.

During the year, the Council made the following scheme for the treatment of persons suffering from cancer :—

CANCER ACT, 1939.

INTERIM ARRANGEMENTS MADE BY THE COUNCIL OF THE COUNTY BOROUGH OF ROTHERHAM (HEREINAFTER CALLED THE COUNCIL) TO SECURE THAT THE FACILITIES FOR THE TREATMENT OF PERSONS SUFFERING FROM CANCER ARE ADEQUATE FOR THE NEEDS OF THE BOROUGH.

- (1) The Council will, as soon as circumstances permit, provide all necessary facilities so that every person in the Borough who is, or is suspected to be, suffering from cancer may obtain advice and that every such person who is found to be so suffering may obtain adequate treatment. In particular, the Council will provide the facilities set out in the following paragraphs.
- (2) The Council, as a first step, will provide at the Municipal General Hospital, Rotherham, and also, by agreement with the Governing Body of the Sheffield Radium Centre, hospital treatment and, where necessary or desired, in-patient accommodation for all persons in the Borough who are suffering from cancer.
- (3) The Council will provide facilities for consultation including both diagnosis and medical observation after treatment at the Municipal General Hospital and the Sheffield Radium Centre and at such other places as they may from time to time determine. They will arrange for the attendance of consultants at these places at such times as may be necessary. These facilities will be available for persons who are suffering or suspected to be suffering from cancer.
- (4) The Council will, by agreement with the Sheffield University laboratory, arrange for the examination of pathological specimens in all cases where such examination is considered necessary for the purpose of diagnosis or treatment.
- (5) In addition to the general arrangements set out above, the Council may provide for the diagnosis and treatment of any individual case at such hospital or other institution and in such manner as seems desirable.
- (6) The Council will in such cases as they consider necessary, pay all or any of the travelling expenses (including the travelling expenses of a companion) reasonably incurred by persons for the purpose of availing themselves of the services provided under these arrangements.
- (7) The Council will arrange for records to be kept in such form as the Minister of Health may from time to time approve, of treatment provided under these arrangements and its results, and will send such records or copies thereof to any persons for the time being designated by the Minister.
- (8) The Council will by such means as appear desirable, give such publicity to these arrangements as they may think necessary for bringing them to the notice of persons to whom they may apply.
- (9) These arrangements shall be supplemented, as soon as practicable, by further arrangements under Section 1 (5) of the Cancer Act, 1939, in order to secure that adequate facilities for the treatment of cancer are available to all persons in the Borough.

(The Scheme received the approval of the Minister of Health on the 25th June, 1943.)

During the year, 113 deaths from cancer took place, as compared with 99 in 1939, 103 in 1940, 131 in 1941, and 97 in 1942.

Details are furnished in the following table regarding the location of the disease, together with the age and sex distribution.

Location of disease		Under 15 years		15-25 years		25-35 years		35-45 years		45-55 years		55-65 years		65-75 years		Over 75 years		Total		Grand total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Buccal cavity and pharynx	M.	-	-	-	-	1	-	-	-	-	-	3	-	-	-	4	-	6	2	6
	F.	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-			
Digestive organs and peritoneum	M.	-	-	1	-	-	1	1	8	17	5	33	-	-	-	18	-	51	18	51
	F.	-	-	-	-	2	-	-	3	8	5	-	-	-	-	-	-			
Respiratory organs	M.	-	-	-	1	1	2	4	3	1	-	12	-	-	-	1	-	13	1	13
	F.	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-			
Uterus	M.	-	-	-	-	3	7	2	2	1	-	15	-	-	-	-	-	15	1	15
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Other female genital organs	M.	-	-	-	-	1	-	1	-	-	-	2	-	-	-	2	-	2	1	2
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Breast	M.	-	-	-	-	1	-	4	5	1	-	11	-	-	-	-	-	11	1	11
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Male genital organs	M.	-	-	-	-	-	-	1	2	1	-	4	-	-	-	4	-	4	1	4
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Urinary organs	M.	-	-	1	-	1	-	-	-	-	-	2	-	-	-	2	-	3	1	3
	F.	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-			
Skin (scrotum excepted)	M.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Brain and other parts of the nervous system	M.	-	1	-	-	-	1	-	-	-	-	2	-	-	-	2	-	4	2	4
	F.	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-			
Other or unspecified organs	M.	-	-	-	-	-	-	-	1	1	1	3	-	-	-	3	-	4	1	4
	F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Totals		-	1	2	-	2	1	3	7	5	9	14	10	26	16	8	9	60	53	113

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1939-43 is as follows :—

In 1939 the percentage was 11·8 ; in 1940, 11·0 ; in 1941, 15·1 ; in 1942, 12·5 ; and in 1943, 12·5.

LOCAL GOVERNMENT ACT.

CORRELATION WITH THE ROTHERHAM HOSPITAL.

During 1943, four meetings took place between representatives of the Rotherham Hospital and the Medical Services Sub-Committee as well as meetings of their medical staffs.

The negotiations regarding the transfer of chronic cases from the Rotherham Hospital to the Municipal General Hospital were completed during the year. The admission of these patients was agreed to in those cases where the Medical Superintendent of the Municipal General Hospital, after the submission by the Rotherham Hospital of full particulars of the case, considered that the best interests of the patient should be served by treatment in the Municipal General Hospital. It was also agreed that the Rotherham Hospital authorities would arrange for patients from the area of the West Riding County Council to be issued with a Relieving Officer's Order prior to admission, so that the maintenance of such patients would be chargeable to that authority.

The scheme under the Cancer Act, detailed in Section V of this report, was discussed and finally approved by the joint meeting.

The arrangements for the establishment of the clinical laboratory and its utilisation by the Rotherham Hospital were mutually discussed, and the provisional terms for the allocation of the costs upon a user basis were agreed.

POOR LAW MEDICAL OUT-RELIEF.

No change has been necessary during the year in the arrangements outlined in the last report.

REMOVAL OF INFIRM OR DISEASED PERSONS.

Section 101 of the Rotherham Corporation Act 1928 enables the Medical Officer of Health to apply to a court for the removal of an infirm or diseased person.

On occasions arrangements are made for the voluntary removal to the institution.

During 1943, one order was made, one person was removed voluntarily and one person died before an order for the removal could be obtained.

SECTION III

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

During the year 1943, the water supply of the area was satisfactory in both quality and quantity.

Chemical and bacteriological examinations were taken of water going into supply. Chemical analyses were made each quarter. Bacteriological examinations, *i.e.*, B.coli test (MacConkey's bile salt lactose broth), of the Ulley and Pinch Mill supplies were taken twice weekly. The probable number of coliform organisms per 100 m.l. was nil for all samples taken during the year.

Water supplied in bulk to Rotherham from Sheffield was also subject to bacteriological examination by Sheffield Waterworks Department.

The moorland water supplied by Sheffield in bulk was treated for plumbo solvent action and as the pH values show was near neutral.

There was no evidence of contamination, chloramine treatment being used as a safeguard on all supplies.

Three houses only were supplied by means of a tap in the yard, all other houses having piped supplies direct into the houses.

CHARACTER OF WATER.

Samples of water from the distribution system were taken at intervals throughout the year and submitted to the Public Analyst for analysis and report. These reports were satisfactory, and the following are typical examples :—

	Langsett water drawn from tap at 8, Danum Drive 24/5/43	Derwent water drawn from tap at 44, Herbert Street 24/5/43	Ulley water drawn from tap at 6, Frederick Street 24/5/43
Physical characters :			
Suspended matter	None	None	None
Appearance of a column 2 ft. long	Slightly cloudy : Yellow	Slightly cloudy : Yellowish	Clear : Yellowish
Taste	Normal	Normal	Normal
Odour	None	None	None
Chemical examination :			
	Parts per 100,000		
Total solids dried at 180°C.	9.50	9.50	31.0
Chlorides as chlorine	1.40	1.40	2.60
Equivalent to sodium chloride	2.29	2.29	4.26
Nitrites	Trace	Trace	Trace
Nitrates as nitrogen	0.04	0.05	0.50
Poisonous metals (lead, etc.)	None	None	None
Total hardness	3.5	3.5	18.5
Temporary hardness	1.0	1.8	6.5
Permanent hardness	2.5	1.7	12.0
Oxygen absorbed in 4 hours at 80°F.	0.136	0.064	0.112
Ammoniacal nitrogen	0.0032	0.0006	0.0046
Albuminoid nitrogen	0.0056	0.0018	0.0064
pH value	7.0	7.2	8.5
	Parts per million		
Free chlorine	0.10	0.10	0.20
Bacteriological examination :			
B. coli test : (MacConkey's bile salt lactose broth).			
Probable number of coliform organisms per 100 ml.	0	0	0
Remarks :			
Langsett and Derwent	The results of the analyses of these samples show no abnormality.		
Ulley	This sample also gives similar results to those obtained on previous samples from this source. The supply is slightly hard.		

All three samples are satisfactory bacteriologically, coliform organisms being absent in 100 ml. in each case.

RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

DRAINAGE AND SEWERAGE.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the River Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

The area of Greasbrough drains to an independent disposal works at Scrooby Lane, Greasbrough.

Brinsworth and part of Whiston drain to the Aldwarke Sewage Works. The remaining parts of this area drain to the Rotherham Rural District Council works under arrangement with that authority.

Cesspools exist in the unsewered parts of the district.

CLOSET ACCOMMODATION.

Two privies and wet ashpits in connection with dwellings were replaced by water closets and movable bins.

There were no other changes during the year.

PUBLIC CLEANSING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer.

Contents of privies, pail closets, fixed ashpits and movable bins are collected and disposed of weekly. Cesspools are emptied by mechanical means as required.

The method of collection of refuse is carried out by petrol-driven rear loading vehicles.

The method of disposal is 100 per cent. controlled tipping in low-lying areas liable to flood and eventually providing playing fields, etc.

In order to facilitate the provision and maintenance of movable ashbins power was granted under the Rotherham Corporation Act, 1930, which enables the Corporation to maintain refuse bins on payment of a certain sum per annum for each premises. This power was put into operation as from 1st April, 1931, and a charge of 1/6 per annum was made. This charge was reduced to 1/- per annum as from 1st April, 1934, and again reduced from 1st April, 1937, to 6d. per annum for which sum the Corporation maintain and renew bins and provide the initial ashbins when fixed ashpits are abolished.

The charge was 9d. per annum for the year ended 31st March, 1944.

The amount of house refuse collected and bins provided or renewed were as follows :—

Refuse collected	19,333 tons 12 cwts.
Bins supplied	1,013

Since the commencement of the scheme 23,049 bins have been provided.

SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year :—

MALE STAFF.	
Complaints investigated	447
Miscellaneous inspections and visits	3,264
Re-inspections of nuisances	2,024
Inspections of work in progress	266
Visits for sanitary alterations	27
Interviews with owners, agents and builders	337
Inspections of tents, vans, and sheds	15
„ „ workshops and factories	267
„ „ offensive trades (including fish friers)	209
„ „ canal boats	3
„ „ cowsheds and dairies	85
„ „ common lodging houses (including visits by Police Inspector)	120
„ „ houses let in lodgings	48
„ „ premises where made up goods are prepared	50
Visits to slaughterhouses (excluding whole time inspector at Public Abattoir)	69
Cases of infectious diseases investigated	372
Visits to zymotic contacts	9
Visits under Food Control Orders	318
Drains tested	135
Number of verbal intimations	441
„ „ preliminary notices and letters	1,033
„ „ statutory notices	64
Matters referred to other Departments	42
Samples obtained under Food and Drugs (Adulteration) Act	133
Informal milk samples for Gerber test	8
Milk samples for bacteriological examination	83
Summonses issued	16
Applications to Court for removal order (infirm persons)	1
Nuisances abated (including a large number of items of different kinds)	1,014

Repairs were carried out by the Corporation in default of the owner in respect of four houses and arrangements were made for the recovery of the costs incurred.

During the year, proceedings were instituted in sixteen cases and the nature and result are as follow :—

Cases	Nature	Result
7	Public Health Act—abatement orders	Abatement orders made.
6	Houses-let-in-lodgings	Total penalties : £6/-/-
1	Food and Drugs Act	Total penalties : £10/13/6
2	Food Control Orders	Total penalties : £15/7/-

Note : The proceedings taken under the Food and Drugs Act and the Food Control Orders are also referred to in Section IV of this report under the appropriate heading.

HOUSING.

Comprehensive repairs to houses were not possible and a general deterioration was noticeable, not only in structure but in lack of cleanliness.

Much work of a minor character was carried out and 892 houses were involved in the inspections.

SMOKE ABATEMENT.

No meeting was held during the year of the Sheffield, Rotherham and District Smoke Abatement Committee. Whilst the request for industrial works to make extra smoke for security purposes was rescinded, no active measures were taken by the Committee to return to their normal policy owing to difficulty in fuel conditions. All industrial organisations in the County Borough were notified of the Government's request that in view of the need for fuel economy, boilers and furnaces should be operated with the greatest possible efficiency.

The following table gives in summary form the soot desposit and sulphur absorption records taken at the College of Technology and the soot deposit records at the Oakwood Hall Sanatorium during the year 1943 :—

COLLEGE OF TECHNOLOGY.

Month	Soot deposit gauge						Sulphur di-oxide monthly estimations (lead cone)
	Rainfall m/m's	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile			Weight of SO ₃ per 100 sq. cms. grammes
				Total soluble	Total insoluble	Total solids	
January ..	78.8	0.243	0.280	8.62	9.93	18.56	3.88
February ..	14.6	0.212	0.415	7.52	14.73	22.25	2.99
March ..	13.2	0.217	0.383	7.70	13.59	21.29	3.74
April ..	33.4	0.221	0.427	7.84	15.15	23.00	2.44
May ..	52.2	0.203	0.316	7.20	11.21	18.42	2.39
June ..	26.4	0.146	0.239	5.18	8.48	13.66	1.89
July ..			No record				2.37
August ..	46.6	0.151	0.433	5.36	15.37	20.73	1.71
September ..	73.3	0.189	0.151	6.71	5.36	12.07	2.29
October ..	35.1	0.219	0.305	7.77	10.82	18.60	2.84
November ..	39.2	0.234	0.390	8.30	13.84	22.15	4.19
December ..	16.8	0.174	0.496	6.18	17.60	23.78	4.41
Average ..	39.0	0.201	0.348	7.13	12.37	19.50	3.19

OAKWOOD HALL SANATORIUM.

Month	Soot deposit gauge					
	Rainfall m/m's	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile		
				Total soluble	Total insoluble	Total solids
January	85.6	0.169	0.264	5.67	8.85	14.52
February	23.7	0.155	0.661	5.20	22.16	27.36
March	16.0	0.137	0.307	4.59	10.29	14.89
April	34.2	0.187	0.173	6.27	5.80	12.07
May	54.6	0.166	0.204	5.57	6.84	12.41
June	35.0	0.095	0.125	3.19	4.19	7.38
July	18.7	0.103	0.103	3.45	3.45	6.91
August	53.9	0.172	0.273	5.77	9.15	14.92
September	83.2	0.203	0.153	6.81	5.13	11.94
October			No record			
November	56.1	0.214	0.348	7.18	11.67	18.84
December	26.3	0.172	0.387	5.77	12.97	18.74
Average	44.3	0.161	0.273	5.40	9.14	14.54

OFFENSIVE TRADES.

The following offensive trades existed in the Borough at the end of December, 1943 :—

Tripe boilers	2
Gut scrapers	1
Rag and bone dealers	2
Blood driers	1

Fish frying is not scheduled as an offensive trade. Byelaws are in operation for the conduct of the business.

During 1943 the following matters were dealt with :—

Tripe boiler :	
Lack of cleanliness	1
Fish frier :	
Lack of cleanliness	10
Drainage defect	2

COMMON LODGING HOUSES.

There was no change during the year.

A total of 120 visits were paid, including visits by the Police Inspector.

HOUSES LET IN LODGINGS.

At the end of 1943, 20 houses let in lodgings were registered. During the year 3 ceased and 3 were entered in the register.

TENTS, VANS AND SHEDS.

The Borough is not seriously troubled by a great number of tents, vans and sheds occupied as dwellings. The number of stationary structures at the end of 1943 was as follows :—

Fixed huts	10
Stationary vans	7
	—
	17
	—

FACTORIES.

The number of factories on the register at the end of 1943 was 295.

During the year, 267 inspections were made to premises and in the following statement particulars of the defects remedied are given :—

Want of cleanliness	25
Insufficient sanitary accommodation	1
Unsuitable or defective sanitary accommodation.. .. .	21
Sanitary accommodation not separate for sexes	2
Drainage defect	4
Insufficient ventilation	1
Other disrepair	3

CANAL BOATS.

During the year, 3 canal boats were inspected. No infringements were observed.

DISPOSAL OF THE DEAD.

Apart from earth burial, cremation facilities are available at the City Road Cemetery, Sheffield. During the year, 20 persons were cremated there, which is double the number cremated in 1942 ; whilst the average for the previous five years was just over six per annum.

SCHOOLS.

HYGIENE.

The overcrowding of classrooms noted in the last report at Thorpe Hesley, Blackburn, and Herringthorpe schools remained throughout the year, owing to certain of the accommodation being taken over as first aid posts.

The nursery classes which have been provided by the Local Education Authority were surveyed during September 1943 by the Senior School Medical Officer, and found to conform very largely with the standards of hygiene laid down in Circular 1614 of the Board of Education.

Increased lavatory accommodation for the staff was provided during the year at Alma Road School, and alterations were made to the lavatories at the Ferham Road School.

CO-ORDINATION.

The close co-operation previously reported upon between the school medical service and the other health activities of the County Borough has been continued throughout the year.

In November, 1943, an additional school nurse was appointed and her time was divided between the nursery classes provided by the Education Authority and the child welfare clinics.

In accordance with the Board of Education Circular 1614 (27/11/42) the nurse has visited a different nursery class each morning during the arrival period, has carried out

routine inspections, referred children with defects to the appropriate clinics, weighed and measured each child every six months, helped at the routine medical inspections and accompanied the school medical officer on his informal visits when immunisation against diphtheria has been carried out. In the afternoon, this nurse assists at the child welfare and ante-natal clinics.

In addition, she has advised in the administration of vitamin supplements (cod liver oil compound and orange juice) to all children under 5 years of age, and iron sulphate tablets prescribed by the School Medical Officer for those children considered to be anaemic. Contrary to expectations very few children have objected to taking raw cod liver oil and there can be no doubt that the provision of these vitamin supplements in schools is a sound step forward.

Record cards of children who have attended infant welfare centres have been transferred in the appropriate cases to the nursery classes, and there has been close co-operation between the nursery class nurse and the health visitors.

Arrangements were made for nursery classes to contact the Department of Health when requiring medical aid in an emergency and informal visits have been paid to the nursery classes from time to time by the School Medical Officer for the purpose of reviewing the environmental conditions and the general health of the children.

RAG FLOCK ACT.

No flocks are manufactured in this district. No samples were taken.

PUBLIC MORTUARY.

The arrangements whereby the mortuary at the Municipal General Hospital was used as the public mortuary was continued throughout the year and 42 bodies were received there and were detained for 152 days. The post-mortem room was used on 26 occasions.

SHOPS ACT, 1934.

No change was made in the arrangements as outlined in previous reports.

RATS AND MICE (DESTRUCTION) ACT, 1919.

The ratcatcher was absent from duty owing to illness during the greater part of 1943. A new ratcatcher was appointed, who commenced duties during September.

498 rats were caught.

ERADICATION OF HOUSEHOLD PESTS.

During the year, two houses were fumigated with H.C.N. for bugs, and one other premises was fumigated for other pests.

Proprietary insecticides were used in connection with the following premises :—

	Bugs	Other household pests
Council houses	140	68
Private houses	103	54
Other premises	8	17

SWIMMING BATHS.

The management of the two public baths in the County Borough and the measures adopted to ensure a satisfactory condition of the water were described in the Annual Report for 1936.

SHELL-FISH.

There are no shell-fish beds or layings in the district, and no action has been taken under the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleansing of Shell-fish) Act, 1932.

SECTION IV

INSPECTION AND SUPERVISION OF FOOD.

MILK.

The following statement shows the number of milk producers in the Borough and also the number of registered retailers at the end of 1943.

Registered cow keepers (producers within the Borough) ..	32
Cowkeepers within the Borough retailing their own supplies ..	20
Retail roundsmen with premises within the Borough ..	15
Retail roundsmen from premises outside the Borough ..	45

Licences issued under Milk (Special Designations) Regulations :—

Tuberculin tested :							
Supplementary ..	..	..	..	..	..	..	2
Accredited :							
Producer ..	..	..	..	..	..	..	1
Dealer ..	..	..	..	..	..	..	1
Supplementary ..	..	..	..	..	..	..	3
Pasteurised :							
Premises ..	..	..	..	..	..	..	1
Supplementary ..	..	..	..	..	..	..	1

The following gives the results of the examination of designated milk during 1943 :—

Tuberculin tested		Accredited		Pasteurised	
Conformed to standard	Not conformed to standard	Conformed to standard	Not conformed to standard	Conformed to standard	Not conformed to standard
5	3	9	1	5	3

Samples of non-designated milk examined during the year as assessed by accredited milk standards showed the following results :—

Satisfied both tests ..	18
Satisfied methylene blue test only ..	4
Satisfied coliform test only ..	19
Failed to satisfy either test ..	16

Fifteen samples of milk were submitted to biological examination for tubercle bacilli with the following results :—

	Positive	Negative
Tuberculin tested milk ..	—	3
Accredited milk ..	—	1
Non-designated milk ..	2	9

MEAT.

During 1943, slaughtering continued under Government control and was centralised at the Public Abattoir. The following figures, supplied by the Markets Superintendent, give the number of animals slaughtered there during the year :—

Cattle	Calves	Sheep and Lambs	Pigs	Total
4,096	901	18,504	1,119	24,620

In addition to the above, 132 pigs were slaughtered on private premises for home consumption.

The total estimated weight of fresh meat and offals condemned during the year was as follows :—

All causes	48 tons 2 cwt.
Tuberculosis only	34 tons 15 cwt.

The percentage of animals found to be affected with disease and injuries is given in the following table :—

	Cattle exclud'g cows	Cows	Calves	Sheep and lambs	Pigs
Number inspected	2,483	1,613	901	18,504	1,251
All diseases except tuberculosis :					
Whole carcasses condemned	3	29	26	133	7
Carcasses of which some part or organ was condemned	89	325	2	647	68
Percentage of the number inspected affected with disease other than tuberculosis	3.70	21.94	3.11	4.21	6.00
Tuberculosis only :					
Whole carcasses condemned	10	90	8	1	3
Carcasses of which some part or organ was condemned	179	632	2	1	105
Percentage of the number inspected affected with tuberculosis	7.61	44.76	1.11	0.01	8.63

Of the 1,251 pigs inspected, 1,119 were seen at the Public Abattoir and 132 on private premises of self suppliers.

No meat marking was carried out during the year.

The Borough continued to be free from butcher meat stalls—except a few meat hawker's vehicles.

OTHER FOODS.

The following table gives details of food other than fresh killed meat condemned during the year :—

Imported meat	..	..	..	..	..	..	2,863	lbs.
Prepared foods	..	..	..	..	..	..	1,314	lbs.
Fish	..	..	..	..	..	..	3,461	lbs.
Mussels	..	..	..	..	..	..	4	bags
Fruit	..	..	..	..	..	..	334	lbs.
Vegetables	..	..	..	..	..	..	52½	cwts.
Groceries	..	..	..	..	..	..	1,259	lbs.
Eggs	..	..	..	..	..	..	847	
Oatcakes and pikelets	..	..	..	..	..	..	5,436	
Tinned food	..	..	..	..	..	..	5,253	tins

FOOD AND DRUGS ACT.

One hundred and thirty-three samples of food and drugs were obtained during 1943 and submitted to the Public Analyst for examination ; sixteen samples were reported to be not genuine—ten of these were milk, five were of gelatine and one of sweet spirit of nitre.

One milk sample was found to contain 22.3 per cent. of added water, and the vendor was fined £10 0s. 0d. and 13s. 6d. costs.

One informal sample of milk together with a follow-up formal sample, showed the presence of a small amount of added water. Subsequently two samples were taken at the place of delivery. One contained a small amount of added water and the other was genuine ; three “appeal to the cow” samples were then taken and reported to be genuine. The cooler was found to be faulty and a warning was sent to the producer. This was repaired and further samples were genuine.

In another instance, three samples were taken at the place of delivery ; one was deficient in milk fat to the extent of 7.6 per cent. and the other two were genuine. The deficiency appeared to be due to insufficient bulking. Letters were sent to the producer and the retailer and subsequent samples taken were genuine.

A street sample was found to be 9 per cent. deficient in fat. This was followed up by taking three place of delivery samples. One sample of evening milk was genuine and the two samples of morning milk were deficient in milk fat to the extent of 6.6 and 7 per cent. respectively. The deficiency was found to be due to uneven milking hours. A letter was sent to the producer and the milking hours were slightly altered. A further sample was found to be still slightly deficient, and the milking hours were again adjusted and later samples were found to be satisfactory.

A street sample of milk was reported to be 15 per cent. deficient in fat. Two “appeal to the cow” samples of evening milk were found to be satisfactory and of three “appeal to the cow” samples of morning milk, two were on the borderline. The deficiency was due to uneven milking hours.

Five samples of gelatine contained a little more than the accepted amounts of metallic content, but as they were considered to be not excessive for war-time products, no further action was taken.

One informal sample of sweet spirit of nitre was found to be deficient in ethyl nitrite. A formal follow-up sample was genuine.

Two jelly samples were examined and were reported to be genuine. As manufacturing licences had not been obtained under Food Control Orders, prosecutions followed, and penalties amounting to £14 0s. 0d. and £1 7s. 0d. costs were imposed.

Details of all samples examined by the Public Analyst are given in the following table :—

Total No.	Nature of Sample	Genuine		Not reported as genuine		Formal samples	
		Formal	Informal	Formal	Informal	Prosecutions instituted	Penalties including costs
3	Baking powder ..	—	3	—	—	—	—
1	Cocoa	—	1	—	—	—	—
3	Coffee	—	3	—	—	—	—
3	Flour (self raising) ..	—	3	—	—	—	—
3	Ground ginger ..	—	3	—	—	—	—
5	Gelatine	—	—	—	5	—	—
2	Jelly	2	—	—	—	2	£15 7 0
85	Milk	75	—	9	1	1	£10 13 6
1	Orange squash ..	—	1	—	—	—	—
3	Pepper	—	3	—	—	—	—
3	Vinegar	—	3	—	—	—	—
3	Ammoniated tincture quinine	—	3	—	—	—	—
1	Antigas ointment No. 2	—	1	—	—	—	—
3	Compound liquorice powder	—	3	—	—	—	—
3	Cream of tartar ..	—	3	—	—	—	—
1	Essence of cinnamon and quinine ..	—	1	—	—	—	—
3	Paregoric	—	3	—	—	—	—
4	Sweet spirit of nitre ..	1	2	—	1	—	—
3	Zinc ointment ..	—	3	—	—	—	—
133		78	39	9	7	3	£26 0 6

SECTION V

INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table :—

Disease	1939	1940	1941	1942	1943
Acute anterior poliomyelitis	1	1	—	—	4
Acute polio-encephalitis	—	—	—	—	—
Cerebro-spinal meningitis	—	19	27	10	5
Diphtheria	149	130	150	134	66
Dysentery	—	—	1	1	3
Encephalitis lethargica	—	—	—	—	—
Erysipelas	36	38	55	47	47
Malaria	—	—	—	1	—
Measles	6	2801	179	1039	871
Ophthalmia neonatorum	20	10	8	11	6
Pemphigus neonatorum	5	12	1	2	—
Pneumonia	112	157	146	136	140
Puerperal pyrexia	11	22	14	9	7
Relapsing fever	—	—	—	—	—
Scarlet fever	76	80	118	214	272
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	—	7	6	3	—
Typhus fever	—	—	—	—	—
Whooping cough	4	94	275	174	211
Tuberculosis—respiratory	38	43	36	71	49
other forms	15	19	16	10	8
Totals	473	3433	1032	1862	1689

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.

Notifiable disease	No. of cases notified													Total cases notified in each ward of the Borough										Total cases removed to hospital	Total deaths
	At all ages	At ages—years																							
		Under 1 year	1 to 2 years	2 to 3 years	3 to 4 years	4 to 5 years	5 to 10 years	10 to 15 years	15 to 20 years	20 to 35 years	35 to 45 years	45 to 65 years	65 years and over	Clifton	East	Greasbrough	Kimberworth	Masbro'	North	St. Ann's	South	Thornhill	West		
Acute anterior poliomyelitis	4	1	1	1	1	1	1	1	1	2	1	1	1	1	1	1	1	1	1	1	3	1	1	2	
Acute polio-encephalitis	5	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Cerebro-spinal meningitis	66	1	1	3	8	18	14	11	7	1	1	1	1	1	2	9	1	7	10	10	7	3	7	64	
Diphtheria	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Dysentery	47	1	1	1	1	2	3	1	3	13	18	6	6	6	2	10	5	3	3	3	3	6	3	2	
Encephalitis lethargica	871	50	98	115	124	297	53	12	8	3	1	12	12	12	129	182	68	90	58	65	69	74	1	58	
Erysipelas	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Malaria	140	9	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Measles	7	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Ophthalmia neonatorum	272	3	3	6	18	21	129	63	12	14	3	20	20	11	77	36	15	12	22	27	9	20	180	1	
Pemphigus neonatorum	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Pneumonia	140	9	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Puerperal pyrexia	7	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Relapsing fever	272	3	3	6	18	21	129	63	12	14	3	20	20	11	77	36	15	12	22	27	9	20	180	1	
Scarlet fever	272	3	3	6	18	21	129	63	12	14	3	20	20	11	77	36	15	12	22	27	9	20	180	1	
Smallpox	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	
Typhoid and paratyphoid fevers	211	28	22	31	48	52	52	2	1	1	1	1	1	1	39	8	30	26	13	25	11	21	42	4	
Typhus fever	49	1	1	1	1	1	1	1	1	1	1	1	1	1	11	3	4	2	3	3	4	6	42	38	
Whooping cough	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Tuberculosis—respiratory	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
other forms	8	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Total	1689	98	131	159	206	514	144	58	65	43	78	31	230	258	75	308	133	150	124	137	114	160	307	119	

ISOLATION HOSPITAL.

The following table shows the number of cases of the principle notifiable diseases which were admitted to the Isolation Hospital during the period under review. The figures in brackets represent non-civilian (service) patients who are also included in the main statistics.

Disease	Cases notified during 1943	In hospital 31st Dec. 1942	Admissions 1943	Discharges 1943	Deaths 1943	Remaining in hospital 31st Dec. 1943	Total patient days
Scarlet fever	272	8	181 (2)	172 (2)	1	16	5589 (55)
Diphtheria	66	10	68 (3)	64 (3)	6	8	3637 (120)
Typhoid fevers ..	—	1	—	1	—	—	109
Cerebro-spinal meningitis	5	—	2	2	—	—	55
Other diseases	—	4	87 (15)	89 (15)	2	—	1317 (215)
Total	—	23	338 (20)	328 (20)	9	24	10707 (390)

The average daily bed occupancy was 29.3 (compared with 35.9 in 1942 and 36.7 in 1941).

At no time during the year was it necessary to utilise the Kimberworth Smallpox Hospital for overflow purposes.

GENERAL OBSERVATIONS ON THE PRINCIPAL DISEASES TREATED.

The following notes indicate the manner in which the notified cases of the principle diseases were dealt with. It should be noted, however, that the figures relate only to civilian notifications of cases of infectious disease occurring within the Borough and which were accepted by this local authority.

SCARLET FEVER.

Of the 272 civilian cases of scarlet fever which were notified during the year, 179 were admitted to the Isolation Hospital, 1 to the Rawmarsh Isolation Hospital and the balance of cases (92) were treated in their own homes. There were also treated at the Isolation Hospital (and not included in the figures given above) 2 members of the services who were subject to notification to adjacent local authorities.

During the year under review more cases were admitted to hospital suffering from scarlet fever than in any year since 1937. Only 1 death occurred and in this case the primary cause of death was broncho pneumonia. The disease generally continued to be of a very mild type and this would tend to reinforce the suggestion (made in the last report) that, when measles is epidemic, scarlet fever patients might profitably be isolated at home wherever possible and the in-patient treatment of measles be given priority.

DIPHTHERIA.

Civilian notifications of this disease totalled 66 during 1943. All but 2 of this number were admitted to the Isolation Hospital for treatment, the other 2 being nursed at home. In addition to the 64 civilian residents there were treated at the Isolation Hospital 3 non-civilians and 1 patient who was the subject of notification to another authority.

The incidence of diphtheria declined sharply during 1943. Six deaths occurred out of the total of 68 patients admitted. Since the intensive campaign for diphtheria immunisation started as late as 1941 it is perhaps too early to ascribe so great a diminution in the number of cases to diphtheria prophylaxis. The percentage of fatal cases, however, still presents a formidable argument in favour of immunisation since no death from diphtheria has occurred among the immunised population.

CEREBRO-SPINAL FEVER.

Two cases of this disease were treated at the Isolation Hospital, 1 at the Rotherham Hospital and 2 at their own homes. The fact that all the notified cases of this serious disease recovered is attributable to modern treatment as indicated in the last report.

OTHER DISEASES.

The following table analyses the cases of "other diseases" who were admitted to the Isolation Hospital for treatment. Figures in brackets refer to service patients and these figures are included in the principal statistics.

Acute anterior poliomyelitis	2	German measles	..	2
Broncho pneumonia	.. 1	Impetigo	.. ..	1
? Cerebro-spinal meningitis		Laryngitis	.. ..	2
(not confirmed)	.. 2	Measles	.. ..	11 (9)
Chickenpox	.. .. 1	Teething rash	.. ..	3
? Diphtheria (not confirmed)	2 (1)	Tonsillitis	.. ..	25 (3)
Diphtheria carriers (not		? Scarlet fever (not		
notifiable)	.. .. 20	confirmed)	.. ..	6 (1)
Drug rash	.. .. 1 (1)	Vincent's angina	.. ..	3
Enteritis	.. .. 2			
Erysipelas	.. .. 3	Total	.. ..	87 (15)

The diagnoses given in the table above are those on discharge and do not necessarily coincide with the provisional diagnosis on admission in each case.

FACILITIES AVAILABLE AT THE ISOLATION HOSPITAL.

The necessary building alterations and improvements outlined in the last report were still outstanding at the end of 1943 owing to war conditions.

KIMBERWORTH HOSPITAL.

This hospital was not used at any time during 1943 for treatment purposes (but see note later in this section regarding typhus fever).

TYPHUS FEVER.

The existence of louse-borne typhus fever in Europe and North Africa made it advisable to take precautions in case the disease reached this country. In 1942 supplies of the necessary protective clothing for the use of staff (doctors, nurses, health visitors, sanitary inspectors, ambulance drivers, etc.,) who would have dealings with cases of typhus fever or contacts, were purchased and distributed in readiness should the necessity for their use arise.

Early in 1943 a scheme of mutual aid was agreed upon whereby the Isolation Hospital, Badsley Moor Lane, would be used for the reception of cases of typhus occurring in Rotherham and adjacent West Riding County areas.

The Kimberworth Smallpox Hospital was designated for use in providing temporary accommodation for contacts of typhus fever during de-lousing. For this district the Swallownest Isolation Hospital was to be utilised as an "overflow" for actual cases and the Brampton-en-le-Morthern Smallpox Hospital as a second-line de-lousing centre for contacts. Financial adjustments between Rotherham and the County areas (and vice versa) were to be made on a user basis.

DIPHTHERIA PROPHYLAXIS.

The facilities for diphtheria immunisation mentioned in the last report have been continued throughout the year.

These facilities have been well advertised—on the screen (by kind permission of the local cinema owners), in the local Press, and in local transport vehicles.

By December 31st, 1943, 40.4 per cent of pre-school (1 to under 5 years) and 60.9 per cent. of school children had completed immunisation against diphtheria. This represents an increase of 5.8 per cent. and 9.8 per cent. in each group respectively.

47 cases of diphtheria occurred in children of 0-15 years and of these 14 were considered to have been adequately protected by immunisation. There were 7 fatal cases ; none of these had been immunised.

SUPPLY OF DIPHTHERIA ANTITOXIN.

Concentrated diphtheria antitoxin continues to be available to medical practitioners on application to the Department of Health. This is used mainly for prophylactic purposes pending final diagnosis. During 1943 only 2 phials (representing 12,000 units) were issued under this scheme.

TYPHOID FEVERS IMMUNISATION.

The scheme which was authorised by the Public Health Committee for the free issue of anti-typhoid vaccine to general practitioners and for the payment of fees to general practitioners for their services in the immunisation of Borough residents continued

in force throughout the year. In spite of extensive publicity in this connection less than 500 persons availed themselves of the opportunity of free immunisation. No immunisations were carried out during 1943.

SCABIES.

During the year scabies treatment at the first aid posts was discontinued owing to shortage of staff. The medical clinics at Ferham House and Coleridge Road were continued.

Children suffering from scabies were given a printed sheet of instructions to take home to their parents. The pamphlet set out the elementary facts concerning scabies and stressed the importance of having the whole family examined and treated together.

At the bottom of the sheet was a tear-off prescription for sulphur ointment—10 per cent. for adults, 5 per cent. for children, and $2\frac{1}{2}$ per cent. for babies. Instructions were given in the use of the ointment and the danger of improper use was stressed. The dangers and possible inadequacy of such a scheme were realised but this seemed to be the only practicable solution of providing a service. Sulphur dermatitis was not common.

During the year 515 cases were dealt with amongst school children.

The scheme worked as well as could be expected. Those families who were reasonably intelligent and care sufficiently for their health, got rid of their infection quickly enough. Those families where other problems abound remained infected. Inertia and indifference on the part of many parents prevented them from carrying out treatment. It is probably the experience of most towns that if a family really wishes to be cured of scabies it can do so inside the home when treatment is prescribed.

It is interesting to note that in the last three years experience of scabies clinics in Rotherham no medical officer and no school nurse has contracted scabies even though it is often necessary to handle these cases during examination. No special precautions such as the wearing of rubber gloves or smearing of the hands with anti-scabietic preparations are taken. By the elementary precaution of washing the hands thoroughly after each case the workers have so far remained uninfected. It would seem that if the general population was really taught the elementary necessity of regular ablution the scabies problem would not be so serious.

Early in the year, the Council approved the treatment free of charge of cases of this disease admitted into the Municipal General Hospital.

BACTERIOLOGICAL LABORATORY.

The arrangements for the establishment of the Clinical Laboratory for the Borough, situated in Block D at the Municipal General Hospital, are detailed in Section II. The work was transferred from the side rooms of the hospital where it had previously been carried out and in October the new laboratory was inaugurated. Major work still continued to be performed at the Sheffield University.

PUBLIC VACCINATION.

There has been no change in any of the offices relating to public vaccination during 1943.

The following details are extracted from the annual return to the Registrar-General and relate to those births which were registered during 1942.

Number of live births returned in birth lists	..	..	..	1,121
„ successfully vaccinated	..	..	..	418
„ insusceptible of vaccination	..	..	..	11
„ of conscientious objectors	..	..	..	617
„ who died unvaccinated	..	..	..	52
Number postponed by medical certificate	..	..	..	—
„ removed to other known districts	..	..	..	8
„ removed to places unknown	..	..	..	8
„ remaining not accounted for	..	..	..	7

The number of persons successfully vaccinated and re-vaccinated at the cost of the rates during 1943 is shown below :—

	NAME OF VACCINATION DISTRICT OR INSTITUTION				Total
	Rotherham South- East	Rotherham North- West	Rotherham Greas- borough	Municipal General Hospital	
Number of successful primary vaccinations	144	124	8	100	376
Number of successful re-vaccinations ..	2	—	—	—	2
Total	146	124	8	100	378

SECTION VI

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1943.

NOTIFICATIONS AND DEATHS.—The following primary notifications of tuberculosis were received during the year :—

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
35	14	2	6	57

In addition, the following cases were brought to notice other than by formal notification :—

	Pulmonary	Non-pulmonary
Death returns from local registrars ..	1	—
Transferrable deaths from Registrar General	1	—
Posthumous notifications	—	—
Transfers from other areas (other than transferable deaths)	5	4

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods Years		NEW CASES*				DEATHS			
		Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
		M.	F.	M.	F.	M.	F.	M.	F.
Under 1	..	—	—	—	—	—	—	—	—
1-5	.. ..	1	—	2	1	—	—	1	—
5-10	.. ..	—	—	1	2	—	—	—	1
10-15	.. ..	—	1	—	—	—	—	—	—
15-20	.. ..	4	3	—	1	—	—	—	1
20-25	.. ..	5	2	—	1	3	2	—	—
25-35	.. ..	7	2	1	2	4	6	—	—
35-45	.. ..	8	3	1	—	2	—	—	—
45-55	.. ..	7	3	—	—	5	—	—	—
55-65	.. ..	6	1	—	—	12	2	—	—
65 and upwards	..	2	1	—	—	2	—	—	—
Totals	..	40	16	5	7	28	10	1	2

* Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1943 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death :—

NOTIFICATION				PULMONARY	NON-PULMONARY
After death	..	..	..	—	—
Within 1 month	..	..	..	6	3
1-3 months	..	..	..	5	—
4-6 months	..	..	..	2	—
7-12 months	..	..	..	1	—
1-2 years	..	..	..	6	—
2-3 years	..	..	..	6	—
3-4 years	..	..	..	1	—
4-5 years	..	..	..	—	—
Over 5 years	..	..	..	9	—
From death returns	..	..	..	2	—
Total number of deaths from tuberculosis				38	3
Causes other than tuberculosis				3	2

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 19.5. No action was required for cases of wilful neglect or refusal to notify.

REGISTER.—The following cases were removed from the register during the year :—

	PULMONARY		NON-PULMONARY		Total
	M.	F.	M.	F.	
Recovery from the disease	5	6	4	6	21
Death (all causes)	30	11	3	2	46
Withdrawal of notification (including transfer out, lost sight of, etc.)	8	3	2	3	16

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications, on the 31st December, 1943, was 471 classified as follows :—

Pulmonary			Non-pulmonary			Total cases
Males	Females	Total	Males	Females	Total	
197	149	346	68	57	125	471

TUBERCULOSIS DISPENSARY.

During the year, 499 new cases attended the dispensary and of these, 42 were found to be definitely suffering from tuberculosis. Of these cases 36 were pulmonary and 20 were found to be sputum positive ; the remaining 6 cases were suffering from non-pulmonary disease.

The following table shows the relation between primary notifications and the cases sent to the dispensary and accepted as suffering from tuberculosis :—

				Primary notifications	Accepted cases attending dispensary
Pulmonary	Males	..	..	35	28
	Females	..	..	14	8
Non-pulmonary	Males	..	..	2	2
	Females	..	..	6	4
				—	—
Total..	..	..	..	57	42
				==	==

The following table compares the figures for new cases examined during 1943 with those for the preceding years. It will be noted that the sharp rise in the number of new cases attending the dispensary first noted in 1942 has been more than maintained this year. This is still in great measure due to examinations under the National Service Acts for the Medical Recruiting Board in Sheffield.

Year	Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1943.. ..	42	2	455	499
1942.. ..	61	17	385	463
1941.. ..	44	6	318	368
1940.. ..	53	6	268	327
1939.. ..	44	2	234	280
Totals	244	33	1660	1937

The following table gives the figures for new cases and contacts examined during the preceding five years (1934–38) compared with the totals of the above table.

Years	Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1939–43	244	33	1660	1937
1934–38	342	39	1284	1665

CONTACTS.—The arrangements for contacts are as enumerated in the last report.

NON-TUBERCULOUS CONDITIONS.—The following conditions were revealed in the persons found to be non-tuberculous :—

No apparent disease	..	260	Nervous diseases	..	3
Respiratory diseases	..	170	Blood diseases	..	1
Circulatory diseases	..	9	Skin diseases	..	1
Digestive diseases	..	3	Other non-tuberculous diseases	..	8

TUBERCULOSIS ALLOWANCES.

The scheme of allowances for persons undergoing treatment for pulmonary tuberculosis and their dependants as laid down in Memo 266/T was considered and adopted by the Council.

The Tuberculosis Officer and the Lay Administrative Officer were authorised to determine and arrange in conjunction with the Borough Treasurer for the payment of maintenance allowances under the scheme.

The Medical Services Sub-Committee were authorised to consider and determine all applications for discretionary allowances and special payments. The Council also approved that the Tuberculosis Care Committee should continue its activities on the same lines as in the past. These arrangements for the working of the scheme have proved successful as the officers concerned have worked together as Medical Officer, Secretary and Hon. Treasurer of the Tuberculosis Care Committee for many years, and are therefore able to appreciate the needs of tuberculous persons coming within the scheme. At the same time, as officials of the Voluntary Committee, they have also been able to help persons coming outside the government scheme by referring these cases to the Care Committee for assistance and overlapping has been avoided.

Leaflets describing the scheme of allowances payable and application forms were made available at the dispensary and at the sanatorium and were given to all patients who were considered eligible under the scheme. In actual practice, the administration of the scheme is in the hands of the Tuberculosis Officer from the medical side from the issue of the application form up to the stage of his making the recommendation for an allowance. At this stage the application is referred to the Lay Administrative Officer who makes the assessment according to the scale of allowances. A copy of this is given to the patient in order that any variations in his income may be reported. The Borough Treasurer makes payment in cash and the allowances are paid at his wages office in the Municipal Offices on Wednesday afternoons between 3.30 and 4.30 p.m. or may be collected at any time later in the week as convenient to the patient. This period was fitted into the general scheme of payments by the Borough Treasurer and so these are made without any distinction. Each case is given an identification card which is presented by the person authorised to draw the patient's allowances.

The first payment was made on Wednesday, 11th August, 1943, for the week ending 14th August, 1943. On the first week's sheet, 10 cases were included, the total amount of allowances paid being £16 0s. 10d. By the end of the year 18 patients had received maintenance allowances under the scheme and of these, 5 had received discretionary allowances. The grounds on which discretionary allowances were made were :—

- 2 allowances for insurance payments
- 2 allowances for hire purchase and insurance payments
- 1 allowance for excess rent and insurance payment.

One application for a discretionary allowance was not granted.

One discretionary allowance for hire purchase payments and insurances was discontinued as the patient was diagnosed after observation treatment as non-tuberculous, and the hire purchase instalments of one of the other cases were completed during the year the discretionary allowance was accordingly reduced.

No special payments have been made to patients, as these have been obviated by requests to the Health Insurance Society for payments to be made to the patient whilst in sanatorium out of benefit accruing during institutional treatment.

Fourteen cases were remaining on the pay sheet at the end of the year and the total of the allowances paid on the last week's sheet was £23 8s. 1d. Four of these patients were receiving discretionary allowances. Of the four allowances discontinued, one observation patient was found to be non-tuberculous and three patients died. During the 20 weeks in which the scheme had been operating £396 0s. 0d. was paid in maintenance allowances ; £9 7s. 4d. in discretionary allowances, making a total of £405 7s. 4d. No special payments were made.

The following return shows the work of the dispensary during the year 1943 :—

DIAGNOSIS	Pulmonary				Non-pulmonary				Total				Grand total
	Adlts.		Child.		Adlts.		Child.		Adlts.		Child.		
	M	F	M	F	M	F	M	F	M	F	M	F	
A.—(1) Number of definite cases of tuberculosis on the dispensary register at 1st January	127	88	27	24	18	7	35	34	145	95	62	58	360
(2) Transfers from other authorities	1	3	1	—	1	1	—	—	2	4	1	—	7
(3) Lost sight of cases returned	1	—	—	—	—	—	—	—	1	—	—	—	1
B.—Number of new cases diagnosed as tuberculous during the year :													
(1) Class T.B. minus.. ..	12	3	—	1	—	—	—	—	12	3	—	1	16
(2) Class T.B. plus	16	4	—	—	—	—	—	—	16	4	—	—	20
(3) Non-pulmonary	—	—	—	—	1	1	1	3	1	1	1	3	6
C.—Number of cases included in A and B written off the dispensary register during the year as :													
(1) Recovered	4	3	1	3	2	2	2	4	6	5	3	7	21
(2) Dead (all causes)	23	8	—	2	—	—	—	—	23	8	—	2	33
(3) Removed to other areas	2	—	1	—	2	—	—	—	4	—	1	—	5
(4) For other reasons	1	—	1	—	—	—	—	1	1	—	1	1	3
D.—Number of definite cases of tuberculosis on the dispensary register at the end of the year.. ..	127	87	25	20	16	7	34	32	143	94	59	52	348

Number of attendances at the dispensary (including contacts) 1,226

Number of consultations with medical practitioners :

(a) Personal 30

(b) Otherwise 328

Number of visits by tuberculosis officer to homes (including personal consultations) 46

Number of visits by nurses or health visitors to homes for dispensary purposes (all visits) 416

Number of :

(a) Specimens of sputum, etc., examined 102

(b) X-ray examinations made in connection with dispensary work 650

Number of "recovered" cases restored to dispensary register and included in B above —

Number of "T.B. plus" cases on dispensary register on 31st December 109

The following summary shows the clinical condition of all patients at the end of 1943, classified as (a) pulmonary cases and (b) non-pulmonary cases, arranged according to the years in which they first came under public medical treatment.

(a) PULMONARY TUBERCULOSIS

Condition at the time of the last record made during the year to which the return relates	Previous to 1939			1939			1940			1941			1942			1943		
	Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus			Class T.B. minus			Class T.B. plus		
	Group 1.			Group 2.			Group 1			Group 1			Group 1			Group 1		
	Total (Class T.B. plus)			Total (Class T.B. plus)			Total (Class T.B. plus)			Total (Class T.B. plus)			Total (Class T.B. plus)			Total (Class T.B. plus)		
Disease arrested— Adults M. F. Children	21 23 37	7 7 —	3 2 1	12 12 1	— — —	— — —	3 1 1	— — —	— — —	3 1 1	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —
Disease not arrested Adults M. F. Children	10 11 2	9 2 —	6 3 —	17 6 2	— — —	— — —	2 2 —	— — —	— — —	4 1 —	— — —	— — —	12 7 —	— — —	— — —	13 3 —	4 1 —	17 4 —
Condition not ascertained during the year ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total on dispensary register at 31st December ..	104	8 27 15	50	9	1 5 —	6 — —	5	— — —	— — —	7 — —	8 1 4	12 19 —	— — —	— — —	— — —	20 — —	16 5 21	— — —
Discharged as recovered Adults M. F. Children	231 170 297	4 13 —	3 2 —	20 8 —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —
Lost sight of, or otherwise removed from dispensary register	431	18 43 15	76	—	— — —	— — —	2 — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —
Dead— Adults M. F. Children	106 52 16	21 6 2	86 47 6	207 115 12	— — —	— — —	3 4 —	— — —	— — —	11 10 —	7 4 —	— — —	6 1 —	— — —	— — —	2 — —	1 1 —	1 1 —
Total written off dispensary register ..	1303	55 195	188	438	8	—	9	—	—	21	8	5	7	1	3	—	2	2
GRAND TOTALS ..	1407	63 222	203	488	17	1	15	13	—	28	16	17	26	8	15	7	23	23

(a) Remaining on dispensary register on 31st December

(b) Not now on dispensary register and reasons for removal therefrom

(b) NON-PULMONARY TUBERCULOSIS

Condition at the time of the last record made during the year to which the return relates	Previous to 1939					1939					1940					1941					1942					1943				
	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total					
Disease arrested— Adults Children	1 1 6	1 1 4	2 — —	1 1 15	4 3 25	— — —	— — 1	— — —	1 1 4	1 1 8	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —					
	2	—	1	—	3	—	—	—	—	1	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—					
	2	—	—	—	4	—	—	—	—	1	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—					
	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Disease not arrested Adults Children	2	—	1	—	3	—	—	—	—	1	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—					
	2	—	—	—	4	—	—	—	—	1	—	—	—	—	3	1	—	—	—	—	—	—	—	—	—					
Condition not ascertained during the year	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Total on dispensary register at 31st December	12	5	3	19	39	5	1	—	5	12	4	2	1	5	12	4	2	—	3	9	1	—	2	—	—					
Transferred to pulmonary	3	1	1	5	10	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Discharged as recovered	5	2	3	9	19	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
	7	2	—	10	19	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Lost sight of, or otherwise removed from dispensary register	56	20	5	113	194	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
	23	7	12	31	73	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Dead	3	1	—	1	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
	3	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
Total written off dispensary register	103	35	25	166	329	—	1	—	1	3	1	1	1	—	1	—	—	—	—	—	—	—	—	—	—					
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—					
GRAND TOTALS of (a) and (b) (excluding those transferred to pulmonary)	115	40	28	185	368	5	2	—	6	13	5	2	1	5	13	4	2	—	3	9	1	—	2	4	7					

DENTAL TREATMENT.

The scheme of dental treatment remains unchanged.

Details of the work performed in 1943 in respect of tuberculous patients are as follow :—

Individuals treated	..	..	..	..	..	..	29
Attendances made	..	..	..	..	..	..	101
Extractions	Permanent teeth	..	..	..	..	..	110
	Temporary teeth	..	..	..	..	..	12
Fillings	Permanent teeth	..	..	..	..	..	18
	Temporary teeth	..	..	..	..	..	—
Anaesthetics	Local	..	..	..	..	..	49
	General	..	..	..	..	..	—
Other operations	..	..	..	..	..	..	46
Patients supplied with dentures	..	..	..	..	..	..	5

The heading “ Other operations ” includes mainly visits for scaling and the making of dentures.

OAKWOOD HALL SANATORIUM.

All the structural and other alterations indicated in the last published report are still outstanding owing to war conditions.

During the year an arrangement was made with Dr. A. W. Fawcett of Sheffield to act as Consultant Thoracic Surgeon.

The following table shows the percentage bed occupancy of the sanatorium during the year :—

Quarter	Patients from			Total
	Rotherham	Yorkshire W.R.	Other areas	
March	55·2	12·7	11·6	79·5
June	50·6	11·0	9·4	71·0
September	52·0	13·3	7·8	73·1
December	50·2	17·5	7·0	74·7
Total	52·0	13·6	8·9	74·5

The low bed occupancy figure of 74·5, as compared with 86·3 in 1942, was not due to a fall in the number of cases, but that only very suitable cases in urgent need of treatment could be admitted. Whilst undesirable, this procedure was essential because of the shortage of nursing and domestic staffs.

ADMISSIONS AND DISCHARGES.—The following table gives details of the number of patients admitted and discharged during the year from the County Borough and the several authorities renting beds in the sanatorium :—

Authority	Remaining in 1/1/43	Admitted	Discharged	Died	Remaining in 31/12/43
Rotherham C.B.	56	65	69	8	44
Yorkshire W.R.C.C... ..	14	17	12	—	19
London C.C.	2	—	2	—	—
Blackpool C.B.	7	8	11	—	4
West Hartlepool C.B. ..	2	3	3	—	2
Northumberland C.C. ..	—	1	1	—	—
Southport C.B.	—	1	1	—	—
Total	81	95	99	8	69

Details of the Rotherham patients treated in the sanatorium during the year are given in the following table :—

Number of patients in hospital	1/1/43	Admitted	Discharged	Died	31/12/43
Observation cases :					
Adults M. ..	6	7	12	—	1
F. ..	—	3	1	—	2
Children ..	7	8	13	—	2
Total	13	18	26	—	5
Pulmonary cases :					
Adults M. ..	18	32	22	5	23
F. ..	14	9	11	3	9
Children ..	—	1	—	—	1
Total	32	42	33	8	33
Non-pulmonary cases :					
Adults M. ..	2	2	4	—	—
F. ..	1	1	—	—	2
Children ..	8	2	6	—	4
Total	11	5	10	—	6
Grand Total ..	56	65	69	8	44

The following table gives particulars of the observation cases admitted to the sanatorium during the year :—

Diagnosis on discharge from observation	For pulmonary tuberculosis						For non-pulmonary tuberculosis						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Tuberculous ..	—	—	—	4	—	—	—	—	—	—	—	1	4	—	1
Non-tuberculous ..	—	1	—	7	—	10	—	—	—	—	—	2	7	1	12
Doubtful	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—
Totals ..	1	1	—	11	—	10	—	—	—	—	—	3	12	1	13

The immediate results of the treatment of definitely tuberculous patients discharged from the sanatorium during the year are given in the following table :—

Classification on admission to the institution		Condition at time of discharge	Duration of residential treatment in the institution															Grand totals
			Over 28 days and under 3 months			3—6 months			6—12 months			More than 12 months			Totals			
			M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	
PULMONARY TUBERCULOSIS.	Class TB minus	Quiescent ..	—	—	—	1	—	—	2	—	—	—	—	—	3	—	—	3
		Not quiescent ..	1	1	—	3	1	—	—	—	—	—	—	—	4	2	—	6
		Died in institution	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1
	Class TB plus Group 1	Quiescent ..	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Class TB plus Group 2	Quiescent ..	—	—	—	—	—	—	—	—	2	—	—	2	—	—	2	
		Not quiescent ..	2	—	—	1	2	—	6	3	—	2	—	9	7	—	16	
		Died in institution	—	—	—	—	—	—	—	1	—	—	—	—	1	—	1	
	Class TB plus Group 3	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Not quiescent ..	1	—	—	1	—	—	—	1	—	—	—	3	1	—	4	
		Died in institution	1	—	—	1	1	—	—	—	1	1	—	3	2	—	5	
		Totals (pulmonary)	5	1	—	8	4	—	9	5	—	4	3	—	26	13	—	39
NON-PULMONARY TUBERCULOSIS.	Bones and joints	Quiescent ..	—	—	—	—	—	—	—	—	2	—	—	2	—	—	2	
		Not quiescent ..	—	—	—	—	—	—	—	—	1	—	—	—	—	5	5	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Abdominal	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	1	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Other organs	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Peri-pheral glands	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	—	—	1	—	—	—	—	—	—	—	1	1	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Totals (non-pulmonary)	1	—	—	—	—	1	—	—	1	2	—	4	3	—	6	9

In addition to the patients dealt with in the above table there was one pulmonary and one non-pulmonary case discharged from and one pulmonary case died in sanatorium within 28 days of admission.

GENERAL TREATMENT.—The general principles of treatment employed have been described in previous reports and remain unaltered.

RECREATION.—Billiards, cards, dominoes, darts, etc., continue to be favourite pastimes together with occasional small whist drives.

LIBRARY.—The library continues to be well used and is a boon to the patients.

SCHOOL.—The children who are unable to receive instruction at the school through being confined to bed are visited daily by the teacher. Lessons are given to children in accordance with their educational standard. The numbers on the register during the year were 12 girls and 13 boys.

MUNICIPAL GENERAL HOSPITAL.

No beds are specifically allocated for the treatment of tuberculosis in the hospital. Details of the cases treated will be found in Section II of this report.

TUBERCULOSIS CARE COMMITTEE.

The activities of the Committee continued throughout the year. Owing to the issue of Memo 266/T by the Ministry of Health, in which financial assistance is granted to cases of pulmonary tuberculosis, the calls made upon the Committee's funds were reduced. When this memorandum was considered by the County Borough Council, it was agreed that the Committee should continue its work of supplementing the official scheme for the treatment of tuberculosis.

The Committee's car park scheme was in abeyance, the Corporation Street car park still being used by the Transport Department for the parking of 'buses.

The Committee's schemes of assistance by extra nourishment, clothing and dentures all continued to function during the year. Extra nourishment in the form of milk, meat, eggs, fresh vegetables and groceries have continued as reported upon previously. During the year, the following grants were made :—

Milk	..	..	..	..	..	..	..	..	130	galls.
Eggs	..	..	..	..	..	..	..	..	454	
Meat	..	..	..	..	..	..	..	..	130	lbs.
Vegetable grants	..	..	..	..	..	..	..	..	83	

Seven patients received grants of clothing, underclothing or boots ; two were provided free of charge with dentures and one was granted assistance towards the cost of the provision of dentures by his National Health Insurance Society. One patient was given pocket money during her treatment in the sanatorium and another was granted rent assistance for his house on the Corporation's housing scheme.

Special grants were made during the Christmas period to persons in receipt of assistance from this Committee and also those borough patients granted leave from the sanatorium. The arrangement with the Social Welfare Committee whereby the Tuberculosis Officer's certificate for grants of extra medical necessities to patients in receipt of assistance by that Committee has also been continued.

The Committee again participated in the Christmas Seal Sale organised by the National Association for the Prevention of Tuberculosis, and this again provided them with a sufficient income to carry on their work.

SECTION VII

VENEREAL DISEASES.

The clinic sessions and staff were reported on fully in the last annual report. There has been no change in either during the year under review.

The following table gives a summary of the patients attending, the diseases treated and the number of attendances made, during the past five years :—

	1939	1940	1941	1942	1943
Number of persons attending who were suffering from :					
Syphilis	225	185 (1)	221 (26)	249 (29)	306 (22)
Soft sore	—	—	—	—	—
Gonorrhoea	148	102 (2)	174 (55)	146 (32)	133 (7)
Conditions other than venereal	111	166	183 (34)	183 (21)	314 (5)
Totals	484	396 (3)	578 (115)	578 (82)	753 (34)
Out-patient attendances :					
To see medical officer ..	4566	5342 (6)	5077 (391)	5192 (300)	6379 (88)
For intermediate treatment ..	2610	1546	1791 (150)	1763 (135)	1598 (41)
Totals	7176	6888 (6)	6868 (541)	6955 (435)	7977 (129)
In-patients :					
Patients admitted to hospital ..	2	5 (1)	7 (1)	7	6
Total in-patient days ..	51	180 (30)	270 (75)	236	91

(Figures given in brackets refer to Service cases treated and these are included in the individual totals.)

It will be seen from the figures given that for 1943 there was a substantial increase in numbers of both patients attending and attendances made. Much of the former increase was attributable to the greater number of patients who attended for conditions other than venereal disease. Many of these patients attended for investigation as a result of the intensive propaganda campaign that was conducted throughout the year. Few of them showed any evidence of venereal disease.

There was a further decline in the number of service cases attending the clinic. Most of those attending, were patients who required continuation treatment while on leave at home.

INDIVIDUAL DISEASES.

SYPHILIS.

Cases of early syphilis form a good index of the amount of recently acquired venereal disease in the population. Until 1943 there had been no significant increase in the number of cases of early syphilis attending the Rotherham clinic. During this year, however, the incidence of new early cases was more than doubled.

The following table gives the number of new cases of early syphilis dealt with at the clinic in each of the past five years.

	1939		1940		1941		1942		1943	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Primary	7	—	6	—	8	—	10	5	16	2
Secondary	—	3	2	2	1	2	3	2	3	15
Latent in first year of infection	3	6	—	4	1	3	2	2	5	13
	10	9	8	6	10	5	15	9	24	30
	19		14		15		24		54	

It will be seen that the increase during 1943 was proportionately greater in females than in males. The figures also show that it is uncommon to see females in the primary stage. When seen for the first time they have usually progressed to the secondary stage, and in many cases, the disease—though recently acquired—has remained latent. This emphasises the importance of trying to locate the female contact, when a male with early syphilis first attends the clinic.

ANTE-NATAL CASES.

The routine blood testing of ante-natal patients attending the district ante-natal clinics, which was started last year, has been continued throughout 1943 with the following results :—

Blood examined	194
Cases in which the blood showed :	
WR++ Kahn++	7
WR— Kahn+ or WR+ Kahn— or WR+ Kahn— or WR— Kahn+ }	10
Patients induced to attend for further examination	9
Patients treated	6

While the number of such women tested in 1943 exceeded the number for 1942 they still fall short of those aimed at, which approximate to 1,000 cases per annum.

Calculations based on investigations undertaken in larger towns and over long periods, lead one to expect an incidence of between 1 and 2 per cent. of latent syphilis in ante-natal patients. By this is meant, women who are in fact suffering from syphilis but who are not aware of it, and in whom the disease has remained latent. The dividends paid by this admittedly expensive procedure appear to be small, but it should be realised that the finding of one case opens up an avenue of discovery of further cases in the same family, either of acquired or congenital syphilis. Further, the whole object of this routine is the **prevention** of congenital syphilis with all its potential evils of blindness, deformity and insanity. In the long run, therefore, provided the co-operation of patients, midwives and doctors is continued the results will more than repay the time and trouble expended.

TOXIC COMPLICATIONS OF ARSENICAL TREATMENT.

Arsenical jaundice continued to show a raised incidence during the year. There was one severe case, two of moderate severity and eleven mild cases.

Other toxic reactions included :—

- 1 Jarisch-Herxheimer reaction.
- 6 mild cases of arsenical dermatitis.
- 1 nitritoid crisis.

GONORRHOEA.

There are no new developments to report in regard to gonorrhoea. The number of cases treated at the clinic showed a further decline from last year. Treatment with sulphonamides (M and B 760 and sulphadiazine) continued to give good results.

NON-VENEREAL DISEASES.

There was a very substantial increase in the number of patients attending the clinic who were not suffering from venereal disease. This increase was largely attributable to the intensified propaganda campaign carried on throughout the year leading to many patients attending for investigation.

Trichomonas vaginalis infections seem to be one of the commonest causes of vaginal discharge in women. They respond extremely well to treatment with stovarsal vaginal compound although the period of observation of these cases is usually prolonged in order that a concomitant gonorrhoeal infection may not be overlooked.

PATHOLOGY.

The pathological work performed during 1943 in connection with venereal disease is summarised in the following table :—

Examinations of pathological material	MICROSCOPICAL for detection of		CULTURAL for detection of	SEROLOGICAL		
	Spiroch- aetes	Gonococci, Trichomonas vaginalis, or other organisms	Gonococci	Wasser- mann or Kahn reaction	Wasser- mann and Kahn reaction	Gonococcal complement fixation test
Specimens from persons attending at the treatment centre which were examined at the centre ..	23	1224	45	—	—	—
Specimens from persons attending at the treatment centre which were examined at an approved laboratory	—	—	—	17	690	82
Specimens from persons in hospitals and from private practitioners' patients which were examined at an approved laboratory	—	1	—	6	216	9

(The above figures are exclusive of 194 Wassermann and Kahn reactions carried out on ante-natal cases.)

EDUCATION.

Efforts to inform the public of the dangers of venereal disease were strongly pursued throughout the year both nationally and locally.

National efforts included the exhibition of posters, press articles, advertisements and film displays.

Local propaganda, designed to supplement the national, gave information of the treatment facilities afforded. Posters were exhibited at railway stations, and on warden's and first aid posts ; advertisements were inserted in the local press ; slides were displayed on the cinema screens and lectures were given to selected audiences by the Venereal Disease Medical Officer.

REGULATION 33B AND CONTACT TRACING.

The object of Regulation 33B made under the Defence (General) Regulations 1939 was “to bring under medical care those infected persons who have shown themselves unresponsive to educational work or to methods of persuasion and who, owing to this refusal to undertake treatment remain a constant source of danger to the health of the community and a drain on the manpower and woman power of the nation in its war effort.”

The Regulation defines “Special Practitioners” who are the appropriate medical officers for carrying the regulation into effect. Where a special practitioner obtains information—after safeguarding so far as possible that malicious information will not be given—concerning the contact of the venereal patient, it is his duty to forward this on the appropriate form to the Medical Officer of Health of the area in which the contact resides. It is the duty of Medical Officers of Health to compile registers of names given under the Regulation. When a contact’s name has been received on two or more occasions, it is possible under the regulation—although voluntary attendance is first urged—to serve an appropriate statutory notice on the contact to attend a special practitioner for examination. The special practitioner must provide a certificate of compliance when the contact has attended, and this is forwarded to the Medical Officer of Health. The special practitioner must also furnish the contact on his or her first attendance, either with a “clearance certificate”, or a certificate requiring the patient to undergo further examination or treatment until the issue of a clearance certificate is possible.

Provisions are made for the transfer of such patients to other areas and to other special practitioners ; penalties are prescribed for failure to carry out the requirements of the various notices.

After a short experience of the working of this regulation it became apparent to many authorities that it would be useful (though of doubtful legality) to take informal action by attempting to persuade once named contacts to attend voluntarily for examination. This policy was given official encouragement in Circular 2896 of the Ministry of Health, dated December 1943. In Rotherham, the necessary visiting of contacts has been carried out by the Venereal Disease Medical Officer and his nurse. The following table shows the work done during the first year of the working of this regulation and refers to patients residing within the Borough :—

	Males	Females
1. Total number in respect of whom Form I was received	3	15
2. Number of cases in (1) in which attempts were made outside the scope of the regulation to persuade the contact to be examined before the latter had been named on a second Form I.. ..	2	14
(a) Contacts found	1	6
(b) Contacts examined	1	6
3. Number of those in (1) in respect of whom two or more Forms I were received	—	3
4. Number of those in (3) who were :		
(a) Found	—	3
(b) Examined after persuasion	—	3
(c) Served with Form II	—	2
(d) Examined after service of Form II	—	2
(e) Prosecuted for failure		
(i) to attend for, and submit to medical examination ..	—	—
(ii) to submit to and continue treatment	—	1

It should be noted that the above figures do not represent the number of Forms I issued by the Venereal Disease Medical Officer who is the special practitioner for this area. Many Forms I were also sent to other medical officers of health, particularly to the West Riding County Council. Some of these contacts did ultimately attend the Rotherham clinic, having been persuaded to attend by the West Riding County Council V.D. Almoner.

Most of the named contacts were females ; this is the general experience throughout the country and is to some extent inevitable, although it has given rise to the charge that the regulation discriminates unfairly against women. In explanation it should be pointed out that when a man contracts venereal disease he is, in the vast majority of cases, quickly aware of it and seeks medical attention. This is not so in the case of women ; partly owing to the anatomical differences which may mask the early signs, partly because many women regard a vaginal discharge as part of their normal lot in life and not as an abnormality, and partly because syphilis has a greater tendency to remain latent in females.

The following case illustrates the working of the regulation.

One woman was named as the contact by six different men who had contracted syphilis from her. Two of these men had, in turn, given syphilis to their wives. She was visited and persuaded to attend voluntarily. Twice she defaulted from treatment, and on the third occasion she was served with the appropriate notices for compulsory attendance. Defaulting once again, she was prosecuted and bound over to attend regularly. (The possible penalty under the regulation is £100 fine or three months imprisonment or both). Following the prosecution she continued to attend regularly and was rapidly rendered non-infectious.

MISCELLANEOUS DEVELOPMENTS.

In conformity with a letter from the Ministry of Health dated June, 1943, arrangements were made to issue a confidential medical certificate to managers of employment exchanges in respect of persons suffering from V.D. and concerning whom it was considered inadvisable to transfer to work in another area.

Ministry of Health Circular 2834 dated July, 1943, advised local authorities to employ venereal disease almoners. In view of the fact that Rotherham had not a sufficiency of V.D. cases to employ a full time almoner, it was decided to engage an almoner with joint duties in venereal disease, mental deficiency and tuberculosis. Efforts to fill this position were unsuccessful.

SECTION VIII

MATERNITY AND CHILD WELFARE.

MIDWIVES.

There were no great changes during the year, the only development being the extension of private practice by the opening of a small maternity home of six beds. This is a form of service for which there has been an increasing demand in the war years.

During 1943, five per cent. of the domiciliary cases and twenty-nine per cent. of the institutional cases—a total of eighteen per cent. of all the confinements of the area occurred in private practice. The remainder were divided almost equally between the domiciliary midwives service and the Municipal General Hospital.

The domiciliary service functioned as last year with one modification : the practice of Herringthorpe being absorbed in those of Broom and Eastdene in February.

Two midwives were granted leave of absence owing to pregnancy, and four midwives resigned from the service during the year. The vacancies thus arising were filled without interruption and temporary relief midwives were employed to cover the leave of absence periods.

There was no change in the supervision of midwives ; no gross breach of the rules of the Central Midwives Board was observed, and therefore no penal action was taken. In January, 1943, Miss Corri, matron of the Hull Maternity Hospital, made a survey of the Rotherham Part 2 Midwifery Training School for the Central Midwives Board. She interviewed teachers and pupils both in the hospital and on the district. No unfavourable comment on the Rotherham scheme of training has been received from the Board arising out of Miss Corri's inspection.

In December, 1943, the local supervising authority took over the tenancy of a house after a midwife had vacated it on leaving the service, and the house was let at the full economic rent to the incoming midwife, conditional on her term of employment. This policy was further extended in the ensuing year, but the recommendations of the Midwives' Salaries Committee on basic rent for midwives has not yet been implemented.

The following table gives the analysis of midwifery practice within the area and includes cases taken at the Sandygate House Annexe of the Municipal General Hospital :—

Number of midwives practising at the end of the year in the area of the Local Supervising Authority :				Number of cases in the area attended during the year by midwives			
				Domiciliary cases		Institutional cases	
				Midwifery	Maternity	Midwifery	Maternity
Employed by the Council as :							
domiciliary midwives ..	10			562	118	—	—
institutional midwives	14			—	—	582	72
Employed by voluntary associations under arrangements with the Council as :							
domiciliary midwives	2			65	7	—	—
institutional midwives	—			—	—	—	—
In private practice as :							
domiciliary midwives ..	2			9	32	—	—
institutional midwives	12			—	—	88	180
Total	40			636	157	670	252

The area distribution of the cases taken by the Council's domiciliary midwives is summarised below :—

Year	Eastdene	Canklow	Eastwood and Cranworth	St. Ann's	Broom and Herringthorpe	Bradgate	Thornhill	Masborough	Meadowbank	Clifton	Thorpe D.N.A.	Greasbrough D.N.A.	Total
1943	82	71	70	61	79	74	60	69	64	50	27	45	752

The decrease in the demand for the domiciliary midwives was in a measure attributable to lack of housing and domestic help.

DISTRICT ANTE-NATAL CLINICS.

There was no change in the conduct of the Ferham House and Coleridge Road clinics. The Thorpe and Greasbro' clinics, hitherto staffed by an assistant medical officer, were taken over by the Obstetric Officer in November, 1943, on a re-organisation of the medical manpower of the Department, thus bringing all the municipal ante-natal clinics within the area under his direct control.

The following table gives the comparative attendance at the district ante-natal clinics :—

Centre	Sessions held	New cases attending for the first time			Total number of women attending			Total attendances		
		Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control
Ferham House ..	24	158	32	—	170	34	—	267	44	—
Coleridge Road ..	48	286	48	5	302	51	15	445	57	27
Greasbrough ..	19	32	8	1	34	10	2	102	14	2
Thorpe ..	12	25	1	1	28	1	1	82	1	1
Total ..	103	501	89	7	534	96	18	896	116	30

ANTE AND POST NATAL CLINICS, MUNICIPAL GENERAL HOSPITAL.

The weekly sessions of the clinics held in conjunction with the maternity ward and at Ferham House for intending maternity patients continued throughout the year. The following table gives details of the cases attending these clinics :—

					Municipal General	
					Hospital	Ferham House
Women attending	..	..	..	..	578	198
Attendances	..	..	..	..	2,799	625

Seventy-seven women attended during the year at the post-natal clinic held at the hospital.

MUNICIPAL GENERAL HOSPITAL.

The following table gives particulars of the cases dealt with at the Sandygate House Annexe at Wath-upon-Dearne and at the maternity ward of this hospital during the year :—

			Sandygate House Annexe	Municipal General Hospital
Number of maternity cases admitted	..	..	555	215
Number of ante-natal cases admitted	..	..	48	53
Average duration of stay	..	..	14 days	14 days
Number of cases delivered by :				
(a) midwives	..	..	471	111
(b) doctors	..	..	32	40
Number of cases in which medical assistance was				
sought by the midwife	..	..	62	69
Number of cases admitted after delivery	..	..	4	11
Number of cases notified as puerperal pyrexia	..	..	9	—
Number of cases of pemphigus neonatorum	..	..	1	—
Number of infants not entirely breast fed while in				
the institution	..	..	57	26
Number of cases of ophthalmia neonatorum	..	..	—	—
Number of maternal deaths	..	..	1	7
Number of infant deaths :				
(i) stillborn	..	..	10	18
(ii) within 10 days of birth	..	..	8	16

NOTIFICATION OF BIRTHS.

The following table gives the births notified during the year :—

Births notified as having taken place within the area :								
From institutions or by doctors :								
Live births	..	..	..	..	..	..	..	403
Still births	..	..	..	..	..	..	..	25
								— 428
By midwives :								
Live births	..	..	..	..	..	..	..	748
Still births	..	..	..	..	..	..	..	13
								— 761
By parents :								
Live births	..	..	..	..	..	..	..	—
Still births	..	..	..	..	..	..	..	—
								— —

From information supplied by the registrars, the following births were not notified :—

Born in institutions or attended by doctors :								
Live births	..	..	..	..	..	..	..	16
Still births	..	..	..	..	..	..	..	1
								— 17
Attended by midwives :								
Live births	..	..	..	..	..	..	..	15
Still births	..	..	..	..	..	..	..	—
								— 15

HEALTH VISITING.

Understaffing has again been the regrettable feature of this service and there were several changes of staff during the year.

Mrs. M. J. Hedley retired on superannuation on the grounds of illhealth in February ; on the 14th August, owing to petrol restriction, Mrs. Hague resigned her appointment as health visitor in Rotherham to take up school nursing work in Sheffield—this being nearer her home.

The peacetime establishment of health visitors is one superintendent and nine district health visitors, of whom one acts as deputy superintendent in the absence of the senior officer.

For five months during 1943, the area staff strength was six, and for the remaining seven months this was reduced to five. No relief health visitors were available for holiday periods. Health visitors were required to pay supervisory visits to the four wartime nurseries up to the end of September, (when Miss Q. Powell commenced duty as superintendent matron), and to attend the monthly medical sessions held at each nursery. Part-time nurses were employed to assist at child welfare and ante-natal clinics, and not more than two health visitors attended any one session.

On this basis fourteen half day units of staff were required to staff the clinics and having regard to holidays, approximately 36 half day units of staff time per week were left for home visiting.

The case load of the section averages 6,850 infants, 400 domiciliary tuberculosis cases and 170 mental defectives under statutory or voluntary supervision on the district. With this ratio it was impossible to cover the whole area and several districts had to be written off.

Time and interest were concentrated on publicising diphtheria immunisation, the cleansing of verminous children, on visiting infants under one year and households of low hygienic standard.

Visits and enquiries in respect of :				Breast abscess	9
Expectant mothers—1st visits ..	142	Ill-cared for children—under 1 year	160	Ill-cared for children—1 to 5 years..	886
Expectant mothers—re-visits ..	49	Measles	189	Chickenpox	26
Post-natal visits—1st visits	234	Pneumonia	21	Whooping cough	90
Post-natal visits—re-visits	40	Diarrhoea	2	Ophthalmia neonatorum	3
Still-births	27	Tuberculosis	413	Tuberculosis—contacts	3
Births—1st visits	1,021	Mental defectives	278	Public lavatories	47
Infants under 1 year	5,192	Half-days spent distributing protective		helmets	1
Infants—1 to 5 years	8,680				
Ineffective visits—under 1 year ..	833				
Ineffective visits—1 to 5 years ..	1,257				
Defects followed up—under 1 year ..	86				
Defects followed up—1 to 5 years ..	297				
Illegitimate children—under 1 year ..	242				
Illegitimate children—1 to 2 years ..	169				

School entrants	305	Follow up visits re anti-gas protection	1,820
School children referred to school medical service	13	Inspections of wartime nurseries ..	121
Foster children (Public Health Act, 1936).. .. .	39	Attendances at :	
Death enquiries	20	Ante-natal clinics	71
Home help enquiries	3	Child welfare clinics	509
Medical aid enquiries	4	Nursery medical sessions	45
Convalescent enquiries	1	Venereal diseases clinics	1
		Tuberculosis dispensary	-
Total half-days spent visiting	1,616		
Houses visited	16,806		

CHILD WELFARE CENTRES.

There is no change to report in the conduct of the child welfare centres but there was a decrease in the enrolment of children attending during the year.

The development of seven nursery classes in the schools has had some influence on child welfare attendance. The numbers of children attending these classes necessitated the appointment in November of a school nurse to devote mornings to the inspection and follow up of nursery class children.

The health visitors' records and the child welfare centre dossiers of the children who had previously attended a centre, were transferred to this school nurse when the children were admitted to the nursery classes. These records were returned to the child welfare section in the event of a child leaving the nursery class before transfer to the school infants' department. Thereby a continuous health and progress record was maintained by the two sections without duplication.

In the afternoon this nurse assisted at the child welfare and ante-natal clinics and worked in close liaison with the health visitors.

The following table gives details of children attending at the child welfare centres during the year :—

Centre	Sessions	New cases		Total children attending		Total attendances		Average attendance per session
		Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	
Ferham House	100	274	31	472	403	2457	1633	40.9
Coleridge Road	100	412	39	612	385	3285	1624	49.0
Greasbrough	50	71	6	119	101	738	395	22.6
Thorpe	24	47	—	64	32	328	137	19.4
Canklow	48	103	9	165	103	935	305	25.8
Nurseries	46	11	20	32	169	175	1149	28.7
Total	368	918	105	1464	1193	7918	5243	—

INFANTILE MORTALITY.

The following table gives the details concerning infantile mortality :—

CAUSE OF DEATH	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under one year
All causes : certified	31	8	1	2	42	20	14	11	6	93
uncertified	-	-	-	-	-	-	-	-	-	-
Small-pox	-	-	-	-	-	-	-	-	-	-
Chicken-pox	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	1	1	-	2
Scarlet-fever	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-	-	-	-	-	-	-
Diphtheria and croup	-	-	-	-	-	-	-	-	1	1
Erysipelas	-	-	-	-	-	-	-	-	-	-
Tuberculous meningitis	-	-	-	-	-	-	-	-	-	-
Pulmonary tuberculosis	-	-	-	-	-	-	-	-	-	-
Other tuberculous diseases	-	-	-	-	-	-	-	-	-	-
Meningitis (not tuberculous)	-	-	-	-	-	-	-	-	-	-
Convulsions	-	-	-	-	-	1	-	-	-	1
Laryngitis	-	-	-	-	-	-	-	-	-	-
Bronchitis	-	1	-	-	1	3	-	1	-	5
Pneumonia (all forms)	-	2	-	-	2	7	5	6	4	24
Diarrhoea	-	-	-	-	-	-	-	-	-	-
Enteritis	-	-	1	1	2	6	8	-	1	17
Gastritis	-	-	-	-	-	-	-	-	-	-
Syphilis	-	-	-	-	-	-	-	-	-	-
Rickets	-	-	-	-	-	-	-	-	-	-
Suffocation, overlying	-	-	-	-	-	-	-	-	-	-
Injury at birth	3	-	-	-	3	-	-	-	-	3
Atelectasis	6	1	-	-	7	-	-	-	-	7
Congenital malformations	4	2	-	-	6	1	-	-	-	7
Premature birth	12	1	-	-	13	-	-	-	-	13
Atrophy, debility & marasmus	3	1	-	-	4	1	-	-	-	5
Other causes	3	-	-	1	4	1	-	3	-	8
Totals	31	8	1	2	42	20	14	11	6	93

Nett births in the year : legitimate infants	1,324
illegitimate infants	73
Nett deaths in the year : legitimate	87
illegitimate	6
Infantile mortality rate per 1,000 births : legitimate	66
illegitimate	82

CONVALESCENT TREATMENT FOR MOTHERS AND BABIES.

The scheme of convalescent treatment was suspended in October, 1940, for the duration of the war.

HOME HELPS.

This scheme was discontinued during 1942 on account of lack of staff. During 1943, only 2 cases were attended, the patients themselves finding the home helps amongst their personal friends, and these were employed for 35 days.

OPHTHALMIC TREATMENT.

No change has taken place in the year under review.

The following table gives details of the work undertaken for expectant mothers and for children under 5 years of age.

Group				Cases	Refractions attendances	Re-inspections	Spectacles prescribed
Mothers	..	..	..	2	2	6	2
Children	..	..	..	44	83	151	29

AURAL TREATMENT.

No change occurred in the arrangements for treatment of aural cases during the year.

Two hundred and ninety-two cases were admitted to the Municipal General Hospital and 287 operations, chiefly for the removal of tonsils and adenoids, were performed. These patients stayed 791 days in hospital.

During the financial year ended 31st March, 1944, 39 child welfare cases were re-charged by the Education Committee to the Medical Services Committee.

ORTHOPAEDIC SCHEME.

There is no change to report in the operation of this scheme and the details of pre-school children attending the orthopaedic clinics are given in the following table :—

Sessions held	New cases attending		Old cases attending		Total children attending		Examinations made	
	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year
7	14	22	1	23	15	45	19	67

Four of these children received in-patient treatment at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during the year.

DENTAL TREATMENT.

The following table shows the details of the work done in the dental clinics during 1943 :—

			Maternity	Child Welfare	Total 1943	Total 1942
Total number of attendances	..		713	124	837	641
Individuals treated	..	..	245	106	351	324
Extractions :						
permanent teeth	..	..	1,611	—	1,611	1,312
temporary teeth	..	..	1	246	247	326
Fillings :						
permanent teeth	..	..	40	—	40	50
temporary teeth	..	..	—	—	—	4
Anaesthetics :						
local	..	..	24	1	25	24
general	..	..	356	113	469	380
Other operations	..	..	334	11	345	197
Patients supplied with dentures..			38	—	38	27

Until further dental staff are appointed, the increased number of patients referred from the maternity centres are balanced by decreases in the treatment of other groups of patients, such as school children.

The number of children under school age referred for dental treatment has declined during the past few years. This is partly accounted for by the fact that, with the opening of nursery schools, many children are now of school age at $2\frac{1}{2}$ years old. It is also probable that the “ wholemeal loaf ”, in which less of the valuable part of the corn is discarded during milling than in the whiter loaf, has a beneficial effect on the teeth.

In the following table, details are given regarding the applications dealt with from expectant and nursing mothers for the provision of dentures :—

					Full dentures	Partial dentures
Applications received	..	..	..	..	65	15
Granted free	..	..	..	..	6	1
Granted half-cost	..	..	..	..	7	1
Granted at cost	..	..	..	..	26	4
Disallowed	..	..	..	..	26	9
Approximate cost	..	..	..	..	£84/14/—	£6/19/9
Amount recovered	..	..	..	..	£64/3/6	£5/7/6

During the year, the charges for dentures were increased to cover the increased manufacturing costs.

In December, the Medical Services Committee amended the income scale for the provision of dentures in the case of those patients who were required under the scheme to pay full cost. Owing to the increased wages obtaining, it was found that many applications were being disallowed owing to incomes being over scale. The amendment should again allow a greater number of women to take advantage of the dental scheme.

FOSTER CHILDREN.

There is no widespread fostering of children in the area and there has been no increase during the war years.

Thirty-nine visits were paid to foster children during the year, and seven children were under supervision of the health visitors at the end of the year.

Shortage of health visiting staff resulted in fewer visits being paid but the cases were selected and the visiting was concentrated on those children deemed most in need of supervision.

ADOPTION OF CHILDREN (REGULATION) ACT, 1939.

This Act which came into operation on the 1st June, 1943, is intended to regulate the making of arrangements by adoption societies and other persons in connection with the adoption of children ; to restrict the making and receipt of payments therewith ; and to provide for the supervision of adopted children by welfare authorities in certain cases.

Adoption societies must now be registered ; and a body of persons, other than a registered adoption society or a local authority, may not make arrangements for the adoption of a child.

Registration of a society may be refused or cancelled on certain specified grounds, and the arrangements made for adoption by registered societies are now controlled.

It is still open to private individuals to make arrangements for adoption, but every person (other than a parent or a legally appointed guardian or the person with whom the child is to be placed) participating in arrangements for placing a child under the age of nine with a person other than a blood relation, must give notice in writing, to the Welfare Authority of the area in which the child is to be placed, at least seven days before possession of the child is taken under those arrangements.

A person who makes the arrangements for the adoption of a child may not receive payment or reward ; and a restriction is placed on advertisements indicating that a parent desires a child to be adopted, or that a person is desirous of adopting a child, or that any person (not being a registered adoption society) is willing to make arrangements for the adoption of a child.

Powers and duties are placed on health visitors where appointed as the child protection visitors of the welfare authority under section 209 (2) of the Public Health Act, 1936.

There are no adoption societies registered with the Rotherham Welfare Authority, and the nearest registered society is the Sheffield and District Adoption Committee, The Council of Social Service, 155, Norfolk Street, Sheffield.

During 1943, two infants were placed within the area by private persons, and in neither instance was notice of intention given to the Welfare Authority in compliance with the terms of the Act.

So far as could be ascertained both infants were placed by officers of the local authority, but acting in a private capacity ; and in both cases notice of the contravention of the Act was given to the person concerned. Thereafter information on the provisions of the Act was circulated among the matrons of private nursing homes, the staffs of the municipal maternity services, and to the Director of Education for the information of his enquiry officers and boarding-out visitors.

Vigilance has to be exercised by health visitors in seeking out " adopted " children and the law still appears faulty in that it allows a parent to " give away " an unwanted child without regulation protecting the infant. Such cases, though rare, are known. The mother is usually of the nomadic type with no permanent domicile. The "adopters" are chance acquaintances of whom the mother has no guarantee of fitness to foster her child and who may be grossly unsuited to the purpose. These adoptions are not legalised by an order, as the " adopters " know full well that their standards would not be approved on application for an order. Should the " adopters " fall on hard times, the infant is handed over to the poor law authority as an abandoned child but may be recovered without hindrance at a later date.

It is in the interest of this group of children, which comes neither directly within the operation of the child life protection regulations of the Public Health Act, 1936, nor the Adoption of Children (Regulation) Act, 1939, that close co-operation and the exchange of information should exist between the officers of the local Welfare Authority and the Poor-law Authority.

In fact the need for an amendment act to extend Child Life Protection has already been proved.

WARTIME NURSERIES.

The arrangements outlined in the last report continued throughout the year. The following table gives the daily average number of children received at each nursery month by month throughout the year.

Month	Moorgate		Arnold Road		Erskine Road		Thames Street		Total	
	Day	Night	Day	Night	Day	Night	Day	Night	Day	Night
January	10·0	0·7	23·1	6·0	25·4	11·8	13·5	6·8	72·0	25·3
February	14·1	2·9	25·4	6·8	10·9	5·0	21·4	10·7	71·8	25·4
March	17·1	5·1	32·1	6·6	23·3	11·9	19·5	9·5	92·0	33·1
April	19·3	8·4	30·9	8·5	22·7	13·0	21·8	11·9	94·7	41·8
May	23·3	10·9	34·1	9·8	21·3	12·6	25·8	15·6	104·5	48·9
June	18·0	7·9	33·7	9·6	25·5	12·9	24·4	15·1	101·6	45·5
July	20·2	7·8	31·9	13·6	29·9	13·8	25·8	14·5	107·8	49·7
August	15·8	7·2	30·1	15·9	25·1	10·8	25·1	12·6	96·1	46·5
September	19·0	7·8	34·4	12·4	35·5	16·5	30·2	14·7	119·1	51·4
October	18·4	7·5	38·7	16·6	29·0	14·6	26·6	16·2	112·7	54·9
November	18·9	11·3	34·2	17·7	25·0	17·6	19·0	18·0	97·1	64·6
December	19·6	10·3	30·8	14·5	23·5	14·0	25·4	17·7	99·3	56·5

In July, the superintendent matron, Mrs. Smith, resigned on the grounds of ill health and Miss Q. E. Powell was appointed in her place. She commenced her duties in September, 1943.

The arrangement whereby monthly child welfare clinics were held at each nursery was continued and the medical officer and district health visitor attended at the 45 sessions held during the year. The health visitors also made 121 supervisory inspections of wartime nurseries.

SECTION IX

MENTAL DEFICIENCY.

In the following table particulars are given for the year 1943 of mental defectives (A) "subject to be dealt with" by the Local Authority, and (B) who may become "subject to be dealt with" by the Local Authority.

A.—Number of cases "subject to be dealt with" :—

					Males	Females	Total
1.	Under "order" :—						
	(a) (1) In institutions (excluding cases on licence).						
	Under 16 years of age				6	3	9
	Aged 16 years and over				33	31	64
	(2) On licence from institutions :						
	Under 16 years of age				—	—	—
	Aged 16 years and over				3	6	9
	(b) (1) Under guardianship (excluding cases on licence) :						
	Under 16 years of age				—	—	—
	Aged 16 years and over				3	3	6
	(2) On licence from guardianship :						
	Under 16 years of age				—	—	—
	Aged 16 years and over				—	—	—
2.	In "places of safety" :						
	Under 16 years of age				—	—	—
	Aged 16 years and over				—	—	—
3.	Under statutory supervision				18	15	33
	Of whom :						
	(a) Awaiting removal to an institution				11	11	22
4.	Action not yet taken under any one of the above headings ..				13	19	32

B.—Number of cases not at present "subject to be dealt with" but for whom the Local Authority may subsequently become liable :—

1.	In institutions or under guardianship—dealt with under Sec. 3..	—	—	—
2.	Reported to the Local Authority from any reliable source and recognised by them as mentally defective but as to whom no action under the Mental Deficiency Acts has been taken :			
	(a) Children between the ages of 14 and 16 years	2	—	2
	Of whom number, if any, under voluntary supervision ..	2	—	2
	(b) All other cases	41	62	103
	Of whom number, if any, under voluntary supervision ..	41	62	103

The number of mental defectives known to the department at the close of 1943 was 258 (119 males and 139 females). Of this number 88 were subject to Orders under the Mental Deficiency Acts, 73 being resident in certified institutions, 9 were on leave of absence on licence from such institutions, and 6 were under guardianship. The following table shows how the defectives in institutions were placed :—

	Males	Females	Total
St. Catherine's, Doncaster	37	27	64
Whittington Hall, near Chesterfield	—	6	6
Stoke Park Colony, Bristol	2	1	3
	—	—	—
	39	34	73
	==	==	==

Excluded from these statistics are four male and one female defectives who are normally resident within the Borough but who are under Order under the Acts and detained in State Institutions.

ADMISSION OF PATIENTS TO CERTIFIED INSTITUTIONS.

Three petitions were presented locally to judicial authorities under the Mental Deficiency Acts and in each case Orders were made for the admission of the defective to St. Catherine's. All were feeble-minded female defectives, their ages on admission being 10, 12 and 29 respectively. The eldest patient, in addition to mental defect, was registered under the Blind Persons Act.

LEAVE OF ABSENCE ON LICENCE.

At the end of 1942 six defectives were on licence leave—four (three male and one female) from St. Catherine's to their own homes, one female from Whittington Hall to the home of a benefactor, and one male from Rampton State Institution to St. Catherine's. Two of the male defectives were returned to St. Catherine's because of misbehaviour at home and the third male defective was discharged from Order by the Board of Control after institutional residence extending over 8 years and licence leave at home for 3 years. The male defective on licence to St. Catherine's from a State Institution was transferred to St. Catherine's by the Board of Control. The females from St. Catherine's and Whittington Hall who were on licence leave at the end of 1942 remained on leave at the end of the year under review.

Initial periods of licence leave were granted to seven defectives during 1943 (two males and three females from St. Catherine's, one male from Stoke Park Colony and one female from The Home, Everton Terrace, Liverpool). The conduct and supervision in those cases proved satisfactory and all remained on leave of absence on licence at the end of the year. The total number of defectives on licence leave (as at 31st December, 1943) was, therefore, nine (three male and six female).

GUARDIANSHIP.

One male adult defective, formerly an inmate of St. Catherine's, was transferred by Varying Order to the guardianship of his father in Cheshire during 1943. This made a total of six defectives under statutory guardianship at the end of the year—four under the supervision of the Brighton Guardianship Society, one under the care of the Central Association for Mental Welfare, and the one (mentioned above) under his father's guardianship.

GENERAL.

At the end of 1943 eleven defectives (two male and nine female) were inmates of either the Municipal General Hospital or The Mount, Alma Road, Rotherham, and fourteen were in receipt of outdoor relief from the Social Welfare Department. Statutory supervision was exercised by the Department of Health in 33 cases (22 of whom were awaiting removal to appropriate institutions) and the balance of 105 mental defectives were under the voluntary supervision of the Department.

It is with regret that a decrease in the number (258 in 1943) of domiciliary visits to the homes of defectives by health visitors has to be recorded. This aspect of general mental deficiency work suffered by reason of serious deficiency in health visitor (and medical) staff and as a result of the increased duties resulting from wartime conditions.

Four defectives were notified to the Local Authority by the Local Education Authority during the year under Section 2 (2)—all were placed under statutory supervision and are awaiting institutional accommodation.

Nine female defectives had children during 1943—six after marriage and three whilst unmarried. In the case of one unmarried defective, the father of the child was convicted at Assize Court for procuring a mental defective and sentenced to eighteen months' imprisonment. Three defectives (two male and one female) married during the year.

Three defectives died during the year under review—a feeble-minded female aged 21 from bronchiectasis, a feeble-minded male of 70 years from chronic bronchitis, and a male imbecile aged 32 from acute enteritis.

ST. CATHERINE'S INSTITUTION.

The South West Yorkshire Joint Board's institution at Doncaster continued to be seriously overcrowded as a result of the earmarking of 100 beds by the Ministry of Health under the Emergency Hospital Scheme. Rotherham's allocation remained at 30 male and 35 female beds. At the end of 1942 38 male and 27 female beds were occupied (not counting the three male and one female patients on leave of absence on licence from

the institution). Three females were admitted in 1943 ; licence leave was cancelled in two instances and the male defectives were returned to St. Catherine's ; one patient on licence was discharged from Order ; one male was transferred to the guardianship of his father ; and licence leave was granted to a further two male and three female defectives. This left 37 males and 27 females in residence at 31st December, 1943, with two males and three females absent from the institution on licence.

OBSERVATIONS.

The fact that institutional accommodation was no longer available (particularly for low-grade cases) was again the paramount difficulty experienced during 1943. If it had been possible to give any definite assurance that proper institutional treatment would have been available within a specific time (even so long as a year), that in itself would have made the burden of the parents or guardians of low-grade defectives easier to bear ; but no such assurance could be given and, in the meantime, a long waiting list was compiled. Only too often it was found that low-grade defective children were compelled to be given what care and supervision was available at their own homes, sometimes with the father away on active service, the mother having to care for other children in the family, often with inadequate living accommodation and with the grave responsibility of providing constant care and supervision to an imbecile child.

